

PLAN OF STUDY FORM - 99/00**MOHEGAN CAMPUS - TRCTC****HOSPITALITY MANAGEMENT
HOTEL MANAGEMENT OPTION**NAME: _____
First Last

STUDENT ID# _____

CERTIFICATE**CREDITS REQUIRED - 34****Advanced Credits:**

Transfer Credits _____

Name(s) of transfer college(s) _____

#CLEP/DANTES _____

#Credit by Exam _____

#APL Credits _____

#Military credits _____

<u>DEPT & NO.</u>	<u>TITLE OF COURSE</u>	<u>CREDITS</u>	<u>PLANNED</u>	<u>COMPLETED</u>
ENG K111*	College Composition	3	_____	_____
HM K101*	Basic Foods	4	_____	_____
HM K102*	Quantity Food I	4	_____	_____
HM K111	Introduction to the Hospitality Industry	3	_____	_____
HM K141	Certification in Food Sanitation and Safety	3	_____	_____
HM K201*	Quantity Food Production II	4	_____	_____
HM K202*	Catering Management	4	_____	_____
OR	OR			
HM K204*	Baking: Pastry Arts			
HM K210	Introduction to Wines, Beers, Spirits, and Beverage Management	3	_____	_____
HM K250*	Hospitality Practicum	3	_____	_____
MAT K106*	Business Applications or higher	3	_____	_____

* Course has a prerequisite or corequisite. Students should check course description in the catalog or semester class schedule.

DEVELOPMENTAL COURSES COMPLETED:Writing Workshop _____
Semester/YearEffective Reading _____
Semester/YearBasic Math Skills _____
Semester/YearBasic Algebra _____
Semester/Year**PLAN OF STUDY REVIEWED BY:**

Advisor _____ Date _____

Student _____ Date _____

Graduation Audit Completed by:

Signature _____ Date _____