

**PLAN OF STUDY FORM - 98/99**  
**MARKETING - 005702**  
**CERTIFICATE PROGRAM**  
**CREDITS REQUIRED - 35**

**MOHEGAN CAMPUS - TRCTC**  
**NAME:** \_\_\_\_\_  
                                     First                                    Last  
**STUDENT ID#** \_\_\_\_\_

Advanced Credits:  
 Transfer Credits \_\_\_\_\_  
 =CLEP/DANTES \_\_\_\_\_  
 =Credit by Exam \_\_\_\_\_  
 =APL Credits \_\_\_\_\_  
 =Military credits \_\_\_\_\_

Name(s) of transfer college(s) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<u>DEPT &amp; NO.</u>	<u>TITLE OF COURSE</u>	<u>CREDITS</u>	<u>SEMESTER COMPLETED</u>	<u>TO BE COMPLETED</u>
ACC 111*	Principles of Accounting I	4	_____	_____
ACC 112*	Principles of Accounting II	4	_____	_____
ECO 111	Macroeconomics	3	_____	_____
ENG 111*	College Composition	3	_____	_____
MGT 111	Principles of Management	3	_____	_____
MRK 111	Principles of Marketing	3	_____	_____
MRK 112	Retailing Fundamentals	3	_____	_____
MRK 113	Principles of Advertising	3	_____	_____
MRK 114	Principles of Professional Selling	3	_____	_____
BUSINESS ELECTIVE: (Accounting, Business, CSC, Management, Marketing)		3	_____	_____
PRACTICUM*		3	_____	_____

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

**DEVELOPMENTAL COURSES COMPLETED:**

Writing Workshop \_\_\_\_\_  
                                     Semester/Year  
 Effective Reading \_\_\_\_\_  
                                     Semester/Year  
 Basic Math Skills \_\_\_\_\_  
                                     Semester/Year  
 Basic Algebra \_\_\_\_\_  
                                     Semester/Year

**PLAN OF STUDY REVIEWED BY:**

\_\_\_\_\_  
 Advisor                                    Date  
 \_\_\_\_\_  
 Student                                    Date  
**Graduation Audit Completed by:**  
 \_\_\_\_\_  
 Signature                                    Date