

Baccalaureate Degree Completion Plan

Name _____

Student ID _____

BRING A COPY OF YOUR TRANSCRIPTS, DARS REPORT, and ASE (IF APPLICABLE) WHEN YOU MEET WITH AN ADVISOR.

PART I – MAJOR COURSES STILL REQUIRED (Separate Part I must be completed for each major and/or minor)

Major/Minor: _____ Current major/minor GPA: _____

Part I must be signed by your major advisor. Contact your department office if you do not have an advisor assigned to you.

Complete the form before reviewing with your advisor for approval. The following is needed to fulfill major requirements:

<u>Course # and Title</u>	<u>Units</u>	<u>Semester</u>	<u>Course # and Title</u>	<u>Units</u>	<u>Semester</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Reviewed and Approved by:

 Major Advisor Signature Date Title Comments: _____

PART II – NON-MAJOR REQUIREMENTS (UNIVERSITY AND GE REQUIREMENTS)

Part II must be signed by an advisor in the Advising Center, a College Resource Center, GE advisor in your major department, or EOP (EOP students only). **Complete the form before reviewing with your advisor for approval.** The following is needed to fulfill non-major and/or other graduation requirements:

OASIS 120 UNITS UD UNITS MIN 60 UNITS JEPET/414 RAISE GPA

<u>Course # and Title</u>	<u>Units</u>	<u>Semester</u>	<u>Course # and Title</u>	<u>Units</u>	<u>Semester</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Reviewed and Approved by:

 Advisor Signature Date Title Comments: _____

PART III - DEGREE COMPLETION PLAN (To be completed by student)

Please complete the following graduation plan, listing by semester the courses you must take to fulfill your graduation requirements. **You are required to update your graduation plan before Early Priority Registration each semester until you graduate.**

Anticipated Date of Graduation: _____

Semester:	_____	_____	_____	_____
Course #/	_____/	_____/	_____/	_____/
Units	_____/	_____/	_____/	_____/
	_____/	_____/	_____/	_____/
	_____/	_____/	_____/	_____/
	_____/	_____/	_____/	_____/

 Student Signature Date

Return the completed form to the Registrar Office. Keep a copy for your files and reference when you register for classes.