ACADEMIC PLAN

NAME : _____
Last First Middle

STUDENT NO. : _____ PROGRAM: _____

List of Courses/Units the student must enroll

ACADEMIC YEAR: _____ **Term: _____**	**ACADEMIC YEAR: _____** **Term: 2nd**	**ACADEMIC YEAR: _____** **Term: 3rd**	**ACADEMIC YEAR: _____** **Term: 4th**
TOTAL UNITS: _____	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**

ACADEMIC YEAR: _____ **Term: 1st**	**ACADEMIC YEAR: _____** **Term: 2nd**	**ACADEMIC YEAR: _____** **Term: 3rd**	**ACADEMIC YEAR: _____** **Term: 4th**
TOTAL UNITS: _____	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**

ACADEMIC YEAR: _____ **Term: _____**	**ACADEMIC YEAR: _____** **Term: _____**	**ACADEMIC YEAR:_____** **Term: _____**	**ACADEMIC YEAR:_____** **Term: _____**
TOTAL UNITS: _____	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**	**TOTAL UNITS: _____**