

SEMESTER _____ YEAR _____

STUDENT'S NAME _____ CAMPUS I.D. NO. _____

MAILING ADDRESS _____

PHONE NO. _____ CLASSIFICATION _____

MAJOR _____ MINOR _____

EMAIL ADDRESS _____

PLAN TO EARN GAME DEV. CERT. Y () N ()

PLAN TO EARN CYBERSECURITY TECH. CERT. Y () N ()

PLAN TO EARN WEB & MOBILE DEV. CERT. Y () N ()

STUDENT SIGNATURE _____

| COURSE REF. NO. (CALL NO.) | COURSE NAME | COURSE NUMBER | LAB | SECTION | SEM. CR. HRS. | COMMENTS |
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APPROVED _____
ADVISOR

_____ TOTAL HOURS

ADVISOR NOTES _____

