Discover Chemeketa Community College

# Academic Plan

This form is a requirement for financial aid and must be signed by an advisor in the Advising Center, or your assigned program advisor. Bring this to your appointment or you may email these materials to: advising@chemeketa.edu. To make an appointment call 503.399.5120, or come to Advising Bldg. 2 Room 115. Please email or bring the following:

1. This form
2. Copy of your unofficial transcripts
3. Copy of your degree requirements (see college catalog)

*Complete the following information:*

Student Name: _____ Student ID Number: **K**_____

Catalog Year: _____

Select One:

- ☐ AAOT: Associate of Arts Oregon Transfer
- ☐ AS: Associate of Science
- ☐ ASOT: Associate of Science Oregon Transfer/Business
- ☐ AST: Associate of Science Transfer in Computer Science
- ☐ AGS: Associate of General Studies
- ☐ AAS: Associate of Applied Science in _____
- ☐ Certification in _____

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To be completed by the Advising Department:

Classes and Credits Remaining to Complete Degree:

| Course # | Credits | Course # | Credits | Course # | Credits |
|---|---|---|---|---|---|
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ |
| Total: | _____ | Total: | _____ | Total: | _____ |

Notes:

_____

_____

_____ _____

Student Signature Date Advisor Signature Date