

Academic Planning Sheet

Name:

TechID#:

Date:

SEMESTER/YEAR	
FALL	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SPRING	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SUMMER	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
FALL	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SPRING	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SUMMER	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
FALL	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SPRING	
Course #	# of Credits
Total Term Credits:	

SEMESTER/YEAR	
SUMMER	
Course #	# of Credits
Total Term Credits:	

Notes/To Do List: