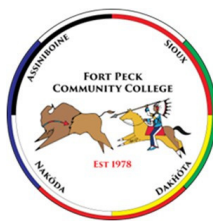


Fort Peck Community College



Advisor: _____

Degree: _____

Credit Hours: _____

Major: _____

Student Name: _____

Catalog Year: _____

First Year Fall Semester

General Education Courses	Credit	√	Program Requirements	Credit	√	
						Semester Totals
General Education Courses Total			Program Requirement Totals			

First Year Spring Semester

General Education Courses	Credit	√	Program Requirements	Credit	√	
						Semester Totals
General Education Courses Total			Program Requirement Totals			

Second Year Fall Semester

General Education Courses	Credit	√	Program Requirements	Credit	√	
						Semester Totals
General Education Courses Total			Program Requirement Totals			

Second Year Spring Semester

General Education Courses	Credit	√	Program Requirements	Credit	√	
						Semester Totals
General Education Courses Total			Program Requirement Totals			
TOTAL GENERAL EDUCATION CREDITS			TOTAL REQUIREMENT CREDITS			
*Pre-Requisite Required	TOTAL MAJOR CREDITS					