



Graduation Plan

Name				Student ID				
Cell Phone Number				Personal Email				
Major(s)				_ Minor(s)				
Track(s) (required for	MKTG be	efore Fall 2024 and all M	10L)					
Graduation Term: _								
				above match Self-Service				
				match Self-Service?				
Total Credits: Will yo	ou have 12	0 or more total credits?		Will you have 42 100-l	evel course	credits or more?		
GPA Checks: Cumulati	ve above 2.	0 Business 100 le	vel above 2.0	0 Accounting majo	rs only - Ac	ecounting 100 level ab	ove 2.0	
AOI'S: E/I (MGMT 110)	Sci	ence with lab? INTE	025 comple	eted (req'd before Fall 202	4) Al	l AOI's completed/plan	ned	
All completed/planned:				inor(s) Business A		ries(BUS 00X)		
				on-Zimpleman program(s)				
Planned Courses:	Are they	offered the term plan	ned?	_ Will the pre-reqs b	e met to b	e able to take them	n?	
Current Term:		Next Term:		Following Term: Following Term:				
Courses	Hours	Courses	Hours	Courses	Hours	Courses	Hours	
			_					
			_					
			-		-			
			+					
Total Credits		Total Credits	+	Total Credits		Total Credi	ita	
				<u> </u>		•		
Following Term:		Following Term:		Following Term:		Following Term:		
Courses	Hours	Courses	Hours	Courses	Hours	Courses	Hours	
			_					
			-					
			+					
			-					
Total Credits		Total Credits		Total Credits		Total Credi	its	
For Advising Specialist	Review							
Date Prepared for Revie			Degree Ev	val Number used		GPAs: Meet Do N	Not Meet	
Items to be addresse	ed:							
-								
a 1 5:								
Student Signature Zing larger Advising Specialist Signature					Date			
Zimpleman Advising Specialist Signature					_ Date			