SCHOOL OF ENGINEERING ACADEMIC PROGRAM PLANNING FORM

Name:_					_ KUID:_			
Semest	er: Fall	Spri	ng Summer _	Advisor:				
Major:				BS	MS (Circ	PhD ele one)	DE	
Dept.	Catalog Number	Class Number	Course Title		Credit Hours	Notes		
Alterna	te Course S	elections	I					
Dept.	Catalog Number	Class Number	Course Title		Credit Hours	Notes		
Total C	redit hours:		-	Excess ho	urs approv	val		
				courses based on my pro or knowing degree requi				
Student's signature					Date			

Advisors signature	Date
If you plan to graduate after completion of the semeste & Pay and apply for graduation after your advising hold is semester before you plan to graduate. For example, if you January 1.	s released. It is best to apply for graduation the
Advisor's Comments	

Revised 3-11