

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

## FRESHMAN YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
Total			
Notes			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
Total			
Notes			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SOPHOMORE YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
Total			
NOTES			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
Total			
NOTES			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

## FRESHMAN YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
Total			
Notes			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
Total			
Notes			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SOPHOMORE YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
Total			
NOTES			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
Total			
NOTES			
Total Credit Hours Completed: _____ Total Credit Hours Completed toward Graduation in Major: _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

**\*\*\*AN APPLICATION FOR GRADUATION MUST BE SUBMITTED BY THE STUDENT TO THE REGISTRAR ONE YEAR PRIOR TO THE EXPECTED GRADUATION DATE. THE STUDENT MUST SUBMIT A GRADUATION UPDATE FORM IF HE/SHE DOES NOT GRADUATE BY THE EXPECTED DATE.**

## JUNIOR YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			

**NOTES**

Total Credit Hours Completed: \_\_\_\_\_

Total Credit Hours Completed toward Graduation in Major: \_\_\_\_\_

SECOND SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			

**NOTES**

Total Credit Hours Completed: \_\_\_\_\_

Total Credit Hours Completed toward Graduation in Major: \_\_\_\_\_

List Required Courses Remaining for Graduation in Major:

  
  
  

List Required Courses Remaining for Graduation in Minor:

  
  
  

Required Forms Completed (check all that are completed):

1. Graduation Application \_\_\_\_\_
2. Course Substitutions \_\_\_\_\_
3. Incompletes \_\_\_\_\_
4. Transfer Credits \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

**\*\*\*AN APPLICATION FOR GRADUATION MUST BE SUBMITTED BY THE STUDENT TO THE REGISTRAR ONE YEAR PRIOR TO THE EXPECTED GRADUATION DATE. THE STUDENT MUST SUBMIT A GRADUATION UPDATE FORM IF HE/SHE DOES NOT GRADUATE BY THE EXPECTED DATE.**

## JUNIOR YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			

**NOTES**

Total Credit Hours Completed: \_\_\_\_\_

Total Credit Hours Completed toward Graduation in Major: \_\_\_\_\_

SECOND SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			

**NOTES**

Total Credit Hours Completed: \_\_\_\_\_

Total Credit Hours Completed toward Graduation in Major: \_\_\_\_\_

List Required Courses Remaining for Graduation in Major:

  
  
  

List Required Courses Remaining for Graduation in Minor:

  
  
  

Required Forms Completed (check all that are completed):

1. Graduation Application \_\_\_\_\_
2. Course Substitutions \_\_\_\_\_
3. Incompletes \_\_\_\_\_
4. Transfer Credits \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

## SENIOR YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			
<b>NOTES</b>			
<b>Total Credit Hours Completed:</b> _____ <b>Total Credit Hours Completed toward Graduation in Major:</b> _____			
<b>List Required Courses Remaining for Graduation in Major:</b>  			
<b>List Required Courses Remaining for Graduation in Minor:</b>  			
<b>Required Forms Completed (check all that are completed):</b> 1. Graduation Application _____ 2. Course Substitutions _____ 3. Incompletes _____ 4. Transfer Credits _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			
<b>NOTES</b>			
<b>Total Credit Hours Completed:</b> _____ <b>Total Credit Hours Completed toward Graduation in Major:</b> _____			
<b>List Required Courses Remaining for Graduation in Major:</b>  			
<b>List Required Courses Remaining for Graduation in Minor:</b>  			
<b>Required Forms Completed (check all that are completed):</b> 1. Graduation Application _____ 2. Course Substitutions _____ 3. Incompletes _____ 4. Transfer Credits _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TOTAL MAJOR CREDITS:** \_\_\_\_\_

# CURRICULUM OUTLINE & AUDIT FORM

DEPARTMENT: \_\_\_\_\_

MAJOR: \_\_\_\_\_ EMPHASIS: \_\_\_\_\_ MINOR: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ HUID: \_\_\_\_\_ PHONE: \_\_\_\_\_

## SENIOR YEAR

FIRST SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			
<b>NOTES</b>			
<b>Total Credit Hours Completed:</b> _____ <b>Total Credit Hours Completed toward Graduation in Major:</b> _____			
<b>List Required Courses Remaining for Graduation in Major:</b>  			
<b>List Required Courses Remaining for Graduation in Minor:</b>  			
<b>Required Forms Completed (check all that are completed):</b> 1. Graduation Application _____ 2. Course Substitutions _____ 3. Incompletes _____ 4. Transfer Credits _____			

SECOND SEMESTER COURSES	CRD	SEM	GRADE
<b>Total</b>			
<b>NOTES</b>			
<b>Total Credit Hours Completed:</b> _____ <b>Total Credit Hours Completed toward Graduation in Major:</b> _____			
<b>List Required Courses Remaining for Graduation in Major:</b>  			
<b>List Required Courses Remaining for Graduation in Minor:</b>  			
<b>Required Forms Completed (check all that are completed):</b> 1. Graduation Application _____ 2. Course Substitutions _____ 3. Incompletes _____ 4. Transfer Credits _____			

Advisor's Name (Print): \_\_\_\_\_

Advisor's Name (Print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TOTAL MAJOR CREDITS:** \_\_\_\_\_