

PLANNED ACADEMIC PROGRAM WORKSHEET

For use of this form, see CC Pam 145-4, the proponent agency is ATCC-PA-C

DATA REQUIRED BY PRIVACY ACT STATEMENT OF 1974

- AUTHORITY:** Title 10, US Code 2101 and 2104
- PRINCIPAL PURPOSE(S):** To provide information and data necessary for administering the Army Senior ROTC program, processing, and managing of selected students for commissioning in the Army IAW established public law and Army Regulations.
- ROUTINE USE(S):** To provide a projected academic plan to determine if the applicant meets the public law requirements of two remaining academic years.
- VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION** Voluntary information is necessary to determine eligibility of the individual for acceptance, continuance, or discontinuance in the Army ROTC program.

1. NAME OF STUDENT (LAST, FIRST, MI)

2. ACADEMIC MAJOR

Biology

2a. CIP CODE
26.0101

3. AS OF DATE (MM/DD/YYYY) (Date of form preparation)

4. Academic School

Clarkson University

a. Identification (Check one):

Host

Extension Center

Cross-Enrolled

c. HOST SCHOOL

Clarkson University

d. HOST FICE

Semester

1

a. Total required for degree:

(1) ROTC Hours that do not count:

(2) Total Hours Rqd for NAPS:

Normal Academic Progression Standard

c. Credits toward degree Comp to date:

b. Transfer Credits accepted:

d. Remaining for Degree:

e. Number of authorized S/Qs:

8

6. GRADE POINT AVERAGE (GPA)

Term:

Curr GPA:

CUM:

Term:

Curr GPA:

CUM:

Term:

Curr GPA:

CUM:

Term:

Curr GPA:

CUM:

Term:

Curr GPA:

CUM:

7. TERM, YEAR, COURSE NUMBER, COURSE TITLE, COURSE CREDIT HOURS, CREDITS THAT COUNT TOWARDS ACADEMIC DEGREE, AND ACHIEVED GRADES.

a.

Term:	Fall	Spring	Year:	
No.	Course Title	Hrs.	Cts.	Grd.
BY140	Bio I	3	3	
BY142	Bio I Lab	2	2	
CM131	Gen Chem I	4	4	
MA180	Intro to College Math	4	4	
UNIV190	CU Seminar	3	3	
FY100	First Yr Seminar	1	1	
Total Term Hours:		17	17	

b.

Term:		Spring	Year:		
No.	Course Title	Hrs.	Cts.	Grd.	
BY160	Bio II	3	3		
BY162	Bio II Lab	2	2		
CM132	Gen Chem II	4	4		
MA181	Basic Calc	3	3		
	KA Elective	3	3		
Total Term Hours:		15	15		

d.

Term:		Spring	Year:		
No.	Course Title		Hrs.	Cts.	Grd.
BY214	Genetics		3	3	
CM242	O Chem II		3	3	
CM244	O Chem Lab		3	3	
STAT318	Biostatistics		4	4	
PH142	Phy Life Sci II		4	4	
Total Term Hours:			17	17	

e.

Term:		Fall	Year:		
No.	Course Title	Hrs.	Cts.	Grd.	
	Bio Elective	6	6		
	Elective	3	3		
	Free Elective	6	6		
			</		

f.

Term:		Spring	Year:		
No.	Course Title	Hrs.	Cts.	Grd.	
	Bio Elective	8	8		
	Tech Elective	3	3		
	Free Elective	3	3		
Total Term Hours:		14	14		

8. STUDENT INITIALS & DATE:

(Have the student initial and date beside each term to indicate they have been counseled)

TERM 1:

TERM 2:

TERM 3:

TERM 7:

TERM 8:

TERM 9:

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Term:		Year:	
No.	Course Title	Hrs.	Cts. Grd.
Total Term Hours:			

Term:		Spring	Year:	
No.	Course Title	Hrs.	Cts.	Grd.
	BY Bio Elective	6	6	
	Knowledge/UC Elective	3	3	
	Free Elective	3	3	
BY401	Professional Assessment	0	0	
Total Term Hours:		12	12	

9.					
Term:		Fall	Year:		
No.	Course Title	Hrs.	Cls.	Grd.	
	BY Bio Elective	5	5		
	Knowledge/UC Elective	3	3		
	Free Elective	6	6		
	Prof Exp in Bio	1	1		
Total Term Hours:			15	15	

Term:		Year:	
No.	Course Title	Hrs.	Cts.
Total Term Hours:			

k.					
Term:		Year:			
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

[illegible]

o.					
Term:		Year:			
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

[illegible]

			Year:	
Term:			Hrs.	Cts.
No.	Course Title			Grd.
Total Term Hours:				

9. REVIEW: All of the above courses are required (as minimum) for the completion of the degree: ☒ Yes ☐ No (if no, list exceptions on reverse side of this form).

degree, during (Month, Year):

10. SIGNATURE OF STUDENT:

11. DATE: (MM/DD/YYYY)

NAME OF REGISTRAR AND EXAMINER OF CREDENTIALS (OR OTHER INSTITUTION CERTIFYING OFFICIAL):

13. DATE: (MM/DD/YYYY)

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STATEMENT OF UNDERSTANDING

We, the undersigned, hereby declare that the program outlined on the worksheet (on the reverse side of this statement) that

Cadet _____ is about to under take a formally structured program approved by _____
(FULL NAME, Last, First, MI) Clarkson University
(Name of University or College)

designed to meet the requirements of a _____ degree; that the degree to be attained is the culmination of an
BS Biology (Type of Degree)

undergraduate college program of at least four years; and that the remaining credit hours shown on the worksheet are necessary either to fulfill
discipline requirements or to fulfill credit hour requirements, or both, for the attainment of the degree. If the Cadet is an ROTC Scholarship
participant, the scholarship will be in force for the number of semesters indicated in Block 5.

(Date) (MM/DD/YYYY) (CADET SIGNATURE)

(Date) (MM/DD/YYYY) (PROFESSOR OF MILITARY SCIENCE SIGNATURE)