

# Campuswide Honors Collegium

## Proposed Academic Course Plan

Name: \_\_\_\_\_

Student ID#: \_\_\_\_\_

Major(s): \_\_\_\_\_

Concentration: \_\_\_\_\_

Minor(s): \_\_\_\_\_

Date Prepared: \_\_\_\_\_

Intended Date of graduation: \_\_\_\_\_  
*(Quarter, Year)*

Number of AP Credits: \_\_\_\_\_

		Fall	units	Winter	units	Spring	units	Summer	units
20__-20__									
	TOTAL			TOTAL		TOTAL		TOTAL	
Goals									
		Fall	units	Winter	units	Spring	units	Summer	units
20__-20__									
	TOTAL			TOTAL		TOTAL		TOTAL	
Goals									
		Fall	units	Winter	units	Spring	units	Summer	units
20__-20__									
	TOTAL			TOTAL		TOTAL		TOTAL	
Goals									

	Fall	units	Winter	units	Spring	units	Summer	units
20__-20__								
	TOTAL		TOTAL		TOTAL		TOTAL	
Goals								
	Fall	units	Winter	units	Spring	units	Summer	units
20__-20__								
	TOTAL		TOTAL		TOTAL		TOTAL	
Goals								

**Do you plan to (check all that apply):**

- Participate in a school/departmental honors program
- Apply for a prestigious scholarship ([www.scholars.uci.edu](http://www.scholars.uci.edu))
- Study abroad ([www.studyabroad.uci.edu](http://www.studyabroad.uci.edu))
- Participate in Capitol Internship Program (<http://uccs.ucdavis.edu/>)
- Attend a post-graduate program (PhD, MD, MS, etc.)

**Questions for your Advisor or Additional Comments (extracurricular plans, internships, long-term goals etc.):**

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**Student acknowledgements:** If I make any changes to this approved course plan, I understand that I am expected to file an updated course plan with the CHC and/or have a petition approved by the CHC faculty director in a timely manner. I also acknowledge that this course plan is to be used for informational purposes only, that academic requirements may change, that it is my responsibility to check with my major advisor on a regular basis to confirm progress toward degree completion, and that my major advisor's signature below simply indicates that we've met about this course plan.