Rogers State University
Degree Completion Plan Worksheet

Name: _____

Major: _____ **Minor:** _____

Student Identification # : _____

Bulletin Year under which the student is requesting plan review _____

Student plans to GRADUATE in the _____**semester of** _____
(Fall or Spring or Summer) **(Year)**

Student will be ATTENDING the MAY graduation CEREMONY OF _____
(Year)

A. Hours Completed: _____ **(Must be applicable to degree)**

B. Hours Currently Enrolled: _____ **(Schedule must be attached)**

C. Hours Yet To Be Completed: _____ **(Summer term only maximum 4 hrs.)** **(Schedule must be attached)**

TOTAL: _____

Courses Needed To Complete Degree (B + C):

Course	Term	Credit Hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Must equal "Hours Currently Enrolled" + "Hours Yet To Be Completed") **Total Hours Needed:**_____

***Variation from the filed degree attached:**_____

_____

_____	_____	_____	_____
Student Signature	**Date**	**Advisor Signature**	**Date**
_____	_____	_____	_____
Academic Dept. Head Signature	**Date**	**Dean Signature**	**Date**

Signing this form indicates a request for this plan to be reviewed by the Registrar. Once reviewed, the plan will either be approved or change noted that will be communicated to the advisor who will contact the student. Approved copies will be sent to the department of record and the student. Graduation completion means:

1. **"Courses Needed To Complete Degree" are satisfactorily completed.**
2. **There are no enrollment changes made to the schedule(s) attached.**
3. **Graduation / Retention G.P.A. is 2.00 or above.** **Graduation GPA:** _____

_____ _____
Registrar's Signature **Date Approved**