

# B.A. PHYSICS Learning Plan

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Advisor Name: \_\_\_\_\_

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⇒ Learning Plan (at least 15 hours not counted elsewhere):

Self-Designed

**OR**

Minor or Second Major: \_\_\_\_\_

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⇒ List learning plan courses totaling at least 15 hours:

<u>Course Number</u>	<u>Course Title</u>	<u>Credit Hours</u>	<u>Semester</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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⇒ Committee Approval:

1) \_\_\_\_\_  
(Print committee member name) (Committee member signature) (Date)

2) \_\_\_\_\_  
(Print committee member name) (Committee member signature) (Date)

3) \_\_\_\_\_  
(Print committee member name) (Committee member signature) (Date)

*Original to Registrar, Copies to student, advisor's student file, and department chair*