## I. ACADEMIC PLAN / TERM REVIEW

<table>
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<tr>
<th>Term:</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
<th>20</th>
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<tbody>
<tr>
<td>COURSE NUMBER</td>
<td>COURSE TITLE</td>
<td>CREDIT HOURS ATTEMPTED</td>
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### Remarks

- Total number of credits REQUIRED for this degree: 
- Total number of ROTC credits which apply towards degree: 

*Does ROTC Lab fulfill all HP requirements for your specific major?*

- Previous college, transfer, AP, CLEP, Dantes credits applied: 

- Total credit hours COMPLETED this term towards degree: 
- Total credit hours REMAINING toward degree: 

- Fall / Spring / Summer Term Initial Evaluation Complete: 

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## II. REMARKS

- I CERTIFY THAT ALL DEGREE REQUIREMENTS HAVE BEEN SUCCESSFULLY COMPLETED TO GRADUATE AS STATED ABOVE. (Cadet sign/date upon graduation): 
- **COMPLETION OF THIS ACADEMIC PLAN WILL RESULT IN A B.A/ B.B.A/ B.F.A/ B.S./ B.S.E/ B.S.C.S/ B.S.F.C.S (circle one) DEGREE IN ____________________________ ON _______________________ (date of graduation).**

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**Must include all Periods of Non-Attendance (PNA's) in their own block on this form. PNA's include, Terms Abroad, Field Training, etc.**
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**TOTAL CREDIT HOURS ATTEMPTED**: 0 0

**REMARKS**: Term Reevaluation Complete: ____________________________
Signature / Date of Institution Official

**TOTAL credit hours COMPLETED this term towards degree**: 0

**TOTAL credit hours REMAINING toward degree**: 0

**STUDENT'S SIGNATURE**

**AFROTC REVIEWER'S SIGNATURE / DATE**

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**AFROTC DET 810 FORM 48, 20151201 PLANNED ACADEMIC PROGRAM**

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**REMARKS**

Term Reevaluation Complete: __________________________________________

Signature / Date of Institution Official

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TOTAL credit hours REMAINING toward degree: 0

**STUDENT'S SIGNATURE**

**AFROTC REVIEWER'S SIGNATURE / DATE**

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## AFROTC DET 810 FORM 48, 20151201

### PLANNED ACADEMIC PROGRAM

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**TOTAL CREDIT HOURS ATTEMPTED:** 0

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Term Reevaluation Complete:

Signature / Date of Institution Official

**TOTAL CREDIT HOURS COMPLETED this term towards degree:** 0

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