

**GENERIC CURRICULUM PLAN**

Student Name \_\_\_\_\_ Student ID No. \_\_\_\_\_ CPO \_\_\_\_\_ Major \_\_\_\_\_

Adviser's Signature \_\_\_\_\_ Date \_\_\_\_\_ Adviser's CPO \_\_\_\_\_

Will this special learning opportunity require an additional term? \_\_\_\_ (1, 2 or 3) extra terms **(Please submit a letter explaining the need for additional terms.)**

**Begin with the current term. Do not include proposed Berea Term Abroad coursework as major requirements.**

Fall Term \_\_\_\_\_ Short Term \_\_\_\_\_ Spring Term \_\_\_\_\_ Summer Term \_\_\_\_\_

Fall Term \_\_\_\_\_ Short Term \_\_\_\_\_ Spring Term \_\_\_\_\_ Summer Term \_\_\_\_\_

Fall Term \_\_\_\_\_ Short Term \_\_\_\_\_ Spring Term \_\_\_\_\_ Summer Term \_\_\_\_\_