

INDIVIDUALIZED CURRICULUM PROGRAM PROPOSAL

Note to applicant: This form is not to be submitted until the ICP Director has approved your pre-proposal.

Date: _____

Name: _____

SSN : _____

Address: _____

Phone: _____

E-mail: _____

Fax: _____

Title of program: _____

Degree sought: _____

Faculty Advisors: (At least 2 advisors are needed for an associate degree; at least 3 for a bachelor's degree. Advisors should be representative of the departments making up the concentration.)

Name	Signature	Department
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note: The advisors' signatures above do not constitute program approval. Individualized curriculum programs may be approved only by the dean of the college granting the degree.

DIRECTIONS FOR FILLING OUT THE FORM ON THE FOLLOWING PAGE

PLEASE TYPE OR PRINT IN INK

1. Your Name
2. Social Security Number

PLEASE LIST ALL COURSES BY DEPARTMENT, CATALOG NUMBER, SEMESTER HOURS (OR QUARTER HOURS AND THEIR SEMESTER EQUIVALENT) AND GRADE (if already earned)

PLEASE DO NOT LIST COURSES YOU HAVE FAILED.

3. Courses you have **Completed** that are to be counted toward the General University Requirements. i.e., English Composition, Humanities, Sciences, Foreign Languages, Social Studies, Health and Physical Education.
4. Courses you have **Completed** in your major concentration.
- 5 & 6. Courses you are **Proposing** to complete for **both** your major concentration and General Requirements. **For a baccalaureate degree, this section must include at least 30 s.h., or at least 20 s.h. for an associate degree.**
7. Courses you have completed and need to complete to satisfy the Foreign Language requirement for your proposed College.
8. Any messages or special instructions may be noted here. If you are uncertain about which courses you may be taking, due to the availability of those courses, please enter the following:

"...plus additional courses in the department of _____ for number of hours."

9. The tabulation of hours that satisfy the requirements in the University bulletin with regard to total hours, major hours, and upper division hours.

Remember that the concentration must include a minimum of **48 s.h.**, and the overall program must include at least **124 q.h.**

If waivers are being requested, write up the justification on a separate sheet of paper and attach it to your proposal.

Revised 12/5/00

1. Name:				2. Social Security Number											
3. General Requirements	CAT#	S H	G R	4. Concentration Completed	CAT#	S H	G R	5. Concentration Proposed	CAT#	S H	G R	6. Electives	CAT#	S H	G R
Writing 1: ENGL	1550														
Writing 2: ENGL	1551														
Speech: COMM	1545														
Mathematics:															
Knowledge Domains:															
NS:															
												7. Foreign Language			
A&LP:															
S&I:												8. Notes:			
P&SR:															
S. Topics:															
Other Courses:												9. TABULATION:			
												Total sh 2600 & Higher			
												Total sh 3700 & Higher			
												Total sh Major Courses			
												Total sh in Program			

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