TRIO-Student Support Services
Semester Course Plan

STUDENT NAME ___________________________________________ SEMESTER TO ENROLL _____

Instructions for students:

Complete the following:

Major: __________________________________________________________
Name of Academic Advisor _______________________________________ Phone # _________________
Office Hours __________________________________________________ Office Location _______________

Make an appointment with your assigned advisor to plan for next semester. Be sure to prepare a list of courses you think are appropriate before visiting with the advisor.

Write your list of courses and alternatives below:

_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________
_____________________________________________

Items to consider in selecting courses:
- General Studies
- Prerequisites
- Personal strengths and weaknesses
- Scheduling considerations (work, etc.)
- Combinations of courses (mix of reading, math, etc.)
- Sequencing of courses
- 12 Credits required to be full-time student
- Courses to be retaken
- Alternative classes for closed sections

While you are working with your advisor, please note any differences between your estimated schedule and your advisor's recommendations. Check with the TRIO-SSS office for that semester’s due date. Return the signed Semester Course Plan to the TRIO-Student Support Services’ office (MSAB #172) by the due date.

Estimated Graduation Date: ____________________________

_____________________________________________

ADVISOR’S SIGNATURE

UNIVERSITY OF NEBRASKA KEARNEY

UNIVERSITY OF NEBRASKA