

South Seattle Community College Educational Planning & Advising Center Worksheet

Student Name: _____ **Student ID#** _____
Professional/Technical Program: _____ **Degree/Major:** _____
Anticipated Graduation Date: _____ **Fall** _____ **Winter** _____ **Spring** _____ **Summer** _____ **Year:** _____

Please note: This form does not represent any form of contract, but is to be used for advising purposes only.

Summer Quarter	Year:	Fall Quarter	Year:	Winter Quarter	Year:	Spring Quarter	Year:
Course:	Credits:	Course:	Credits:	Course:	Credits:	Course:	Credits:
Total Credits		Total Credits		Total Credits		Total Credits	
Summer Quarter	Year:	Fall Quarter	Year:	Winter Quarter	Year:	Spring Quarter	Year:
Course:	Credits:	Course:	Credits:	Course:	Credits:	Course:	Credits:
Total Credits		Total Credits		Total Credits		Total Credits	
Summer Quarter	Year:	Fall Quarter	Year:	Winter Quarter	Year:	Spring Quarter	Year:
Course:	Credits:	Course:	Credits:	Course:	Credits:	Course:	Credits:
Total Credits		Total Credits		Total Credits		Total Credits	

VLPA: Visual, Literacy & Performing Arts
 I & S: Individuals & Societies
 NW: Natural World

Advisor or Counselor Signature & Date