

Personal Academic Plan

Student Name: _____ ID#: _____ 1st Sem. at CoSCC: _____

Advisor Name: _____ Major: _____ Graduation Date: _____

I will complete the following goals:

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| <u>Goal 1:</u> | <u>Goal 2:</u> | <u>Goal 3:</u> |
| Complete? Completion Date: | Complete? Completion Date: | Complete? Completion Date: |

| Fall 20____ | Grade | Spring 20____ | Grade | Summer 20____ | Grade |
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| Semester GPA _____ | Semester GPA _____ | Semester GPA _____ |
| Cumulative GPA _____ | Cumulative GPA _____ | Cumulative GPA _____ |
| Forms Needed/Deadlines _____ | Forms Needed/Deadlines _____ | Forms Needed/Deadlines _____ |

| Fall 20____ | Grade | Spring 20____ | Grade | Summer 20____ | Grade |
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| Semester GPA _____ | Semester GPA _____ | Semester GPA _____ |
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| Fall 20____ | Grade | Spring 20____ | Grade | Summer 20____ | Grade |
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| Semester GPA _____ | Semester GPA _____ | Semester GPA _____ |
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