Approved 18-Hour Program of Study for BS Applied Mathematics: General

Student _____ ID _____

Advisor _____

Date of Proposal _____

Date of Approval by Mathematics Curriculum Committee _____

Course	No. of Hours	Grade	Quality points	Date of Completion

Total _____ Total _____

Upper Level _____ GPA _____

Signatures:

Student _____ Date _____

Advisor _____ Date _____

Committee Chair _____ Date _____