

4. **Academic Department Core Requirements**

Course #	Course Title	Units	Grade

Course #	Course Title	Units	Grade

5. **Academic Department Electives**

Course #	Course Title	Units	Grade

Course #	Course Title	Units	Grade

6. **(additional electives from other disciplines)**

Course #	Course Title	Units	Grade

Course #	Course Title	Units	Grade

GRADUATION REQUIREMENTS

TOTALS	
Transfer Units (1 semester unit = 1.5 quarter units)(9 quarter units maximum)	
Total SCU Units	
Total Units (46 quarter units minimum)	
Current Cumulative GPA	

I understand that it is my responsibility to:

Ensure the transcripts for transfer credits are sent to the Graduate Services Office.

1. Obtain my advisor's approval and signature of this program and of any subsequent changes needed.
2. Complete the program as approved with a minimum of 46 units and a 3.0 cumulative GPA with no grade below C-.

Student Signature/Date: _____ / _____

Advisor Name (print): _____

Advisor Signature/Date _____ / _____

Thesis Required []

Thesis Title: _____ Date Submitted: _____