# Undergraduate - Academic Plan for Teach-Out

*(Use only as many semesters as are designated for teach-out)*

|  |  |
| --- | --- |
| **Degree Program:** | (e.g., BS German) |
| **Name of Student and Student ID**: |  |

**Required Courses already completed for the Degree**

|  |  |  |  |
| --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Comments (e.g., which requirement the course fulfills)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Courses Remaining for Program Completion**

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**SEMESTER, YEAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course Number** | **Course Name** | **Credit Hours** | **Instructor** | **Date Completed** | **Comments (attach additional comments if necessary)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Other Requirements (Specify):**

|  |
| --- |
| Date Completed: |

I have received and reviewed my academic teach-out plan that enables me to complete my degree program/minor within the teach-out period. I understand it is my responsibility to complete the program within the teach-out period.

|  |  |
| --- | --- |
|  |  |
| **Signature of Student** | **Date** |
|  |  |
| **Signature of Advisor or Program Coordinator** | **Date** |
|  |  |
| **Department Head** | **Date** |
|  |  |
| **Dean, College** |  |