**Bachelor of Science (BS)**

**Degree Code 195A**

|  |
| --- |
|  |

**Student Name:**

|  |
| --- |
|  |

**Banner ID:**

|  |
| --- |
|  |

**Catalog Year:**

*2020-2021 and onward*

**Title of Program of Study Statement of Goals:**

|  |
| --- |
|  |

**Approved “Program of Study Contract”**

This contract will consist of a minimum of 30 semester hours selected from two or more disciplines with at least 15 semester hours at the 3000 level or above.

 Prefix Number Course Title Sem. Hrs

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Approvals Name Date**

|  |
| --- |
|  |

**Advisor:**

|  |
| --- |
|  |

|  |
| --- |
|  |

|  |
| --- |
|  |

**IDS Chair:**

|  |
| --- |
|  |

**Sent to Dean’s Office on:**