



## Course Planning Worksheet

Name \_\_\_\_\_ Student ID or last four digits of Social Security Number \_\_\_\_\_

Program of Study \_\_\_\_\_ Fall  Spring  Summer

Course Number	Section Number	Days	Time	Credit Hours

	Monday	Tuesday	Wednesday	Thursday	Friday
8 a.m.					
9 a.m.					
10 a.m.					
11 a.m.					
12 p.m.					
1 p.m.					
2 p.m.					
3 p.m.					
4 p.m.					
5 p.m.					
6 p.m.					
7 p.m.					
8 p.m.					