

# Degree Completion Plan Worksheet

Department of Kinesiology

Please start your plan with the semester you are currently enrolled in.

Student Name: \_\_\_\_\_ Major: \_\_\_\_\_ Student ID#: \_\_\_\_\_

## FIRST YEAR

Semester \_\_\_\_\_

Semester \_\_\_\_\_

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## SECOND YEAR

Semester \_\_\_\_\_

Semester \_\_\_\_\_

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