



ACADEMIC TENTATIVE DEGREE COMPLETION CHECKLIST

| | | |
|----------------------|-----------------------------|---------|
| Student Name | Banner ID | |
| Catalog Year | Anticipated Graduation Date | Advisor |
| Additional Comments: | | |
| | | |
| | | |

| | | | | |
|--------------|------------------------|--------------|--------------------------|--------------|
| YEAR 1 WL | Semester 1 Fall | Hours | Semester 2 Spring | Hours |
| | | | | |
| | Semester Hours: | | Semester Hours: | |
| | Notes: | | | |

| | | | | |
|--------------|------------------------|--------------|--------------------------|--------------|
| YEAR 2 WL | Semester 1 Fall | Hours | Semester 2 Spring | Hours |
| | | | | |
| | Semester Hours: | | Semester Hours: | |
| | Notes: | | | |

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|--------------|------------------------|--------------|--------------------------|--------------|
| YEAR 3 WL | Semester 1 Fall | Hours | Semester 2 Spring | Hours |
| | | | | |
| | Semester Hours: | | Semester Hours: | |
| | Notes: | | | |

| | | | | |
|--------------|------------------------|--------------|--------------------------|--------------|
| YEAR 4 WL | Semester 1 Fall | Hours | Semester 2 Spring | Hours |
| | | | | |
| | Semester Hours: | | Semester Hours: | |
| | Notes: | | | |