

MECOP / CECOP CURRICULUM PLAN

Spring-Summer / Summer-Fall Internship Group



NAME:

ID:

This form must be completed by all MECOP / CECOP students. Schedule an appointment with your MECOP / CECOP Advisor prior to each term to review your plan. This is designed to help keep you academically on track for graduation while participating in MECOP / CECOP internships.

- * Please fill out this form in **PENCIL** so it can be modified when you meet with your advisor
- * It must be updated at least annually or when changes to your course plan are made.
- * Make sure to review and update your plans at least two weeks prior to your next school term:
- * New students must file this course plan within the first four weeks of the Fall term you enter the program.
- * All students must be advised before the internship placement process, for the term after their internship .

Original Date	Student Initials	Advisor Initials
Revision Date	Student Initials	Advisor Initials

FALL TERM 20__		
Dept	No.	Credits
TOTAL		

WINTER TERM 20__		
Dept	No.	Credits
TOTAL		

SPRING TERM 20__		
Dept	No.	Credits
MECOP INTERNSHIP		

FALL TERM 20__		
Dept	No.	Credits
TOTAL		

WINTER TERM 20__		
Dept	No.	Credits
TOTAL		

SPRING TERM 20__		
Dept	No.	Credits
TOTAL		

FALL TERM 20__		
Dept	No.	Credits
MECOP INTERNSHIP		

WINTER TERM 20__		
Dept	No.	Credits
TOTAL		

SPRING TERM 20__		
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TOTAL		

FALL TERM 20__		
Dept	No.	Credits
TOTAL		