

CERTIFICATE

Student's Name (Exactly as Desired on Award):		Date:	
SID#:		When do you plan to complete your program? Fall ___ Winter ___ Spring ___ Summer ___ 20 ___	
Street Address:		State: Zip Code:	

INFORMATION TECHNOLOGY -- APPLICATIONS SUPPORT

SECTION I <input type="checkbox"/>	SECTION II	SECTION II <input type="checkbox"/>	INSTRUCTIONS
	CODE: T=Transtr C=Challenge W=Work Exp.	Do Not Write in This Section	
	This Qtr	Past Qtr	Next Qtr
Applications Support: Certificate			
Prerequisites			
ENG 106 Technical Writing		3	
MIC 101 Intro to Microcomputer Applications		4	
ITC 102 - Info Computer Concepts		3	
Certificate (If <i>OR</i> , circle one)			
ITC 134 Operating Systems		5	
ITC 140 Intro to Computer Hardware		5	
MATH 119 Math Behind IT		3	
MIC 110 Program Design & Development <i>OR</i> ITC 110		4	
MIC 120 Databases, Applications & Design w/MS Access		4	
MIC 151 HTML & Web Page Development <i>OR</i> WEB 110		4	
MIC 160E Supporting MS Excel		4	
MIC 160P Supporting MS Powerpoint		4	
MIC 160W Supporting MS Word		4	
MIC 175 Computer User Support <i>OR</i> BUS 140 (5 Cr)		4	
MIC 197 Work Experience Project <i>OR</i> ITC 197 <i>OR</i> CIS 197		4	
NET 120 Networking Essentials <i>OR</i> ACCT& 201		5	
Total (Not Including Prerequisites):		50	
Evaluator:	Date:	Dean:	Date:

1. Place an "X" in the appropriate column of Section 1.
2. Enter coder for Transfers, Challenges and Work Experience in Section II.
3. Return this form to the Registrar's Office in Room BE 1104.

Notes: