

PLANNED ACADEMIC PROGRAM WORKSHEET

For use of this form, see USACC Pam 145-4, the proponent agency is ATCC-PA-C

DATA REQUIRED BY PRIVACY ACT STATEMENT OF 1974

1. **AUTHORITY:** Title 10, US Code 2101 and 2104
2. **PRINCIPAL PURPOSE(S):** To provide information and data necessary for administering the Army Senior ROTC program, processing, and managing of selected students for commissioning in the Army IAW established public law and Army Regulations.
3. **ROUTINE USE(S):** To provide a projected academic plan to determine if the applicant meets the public law requirements of two remaining academic years.
4. **VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION** Voluntary information is necessary to determine eligibility of the individual for acceptance, continuance, or discontinuance in the Army ROTC program.

1. NAME OF STUDENT (LAST, FIRST, MI)	2. ACADEMIC MAJOR	2a. CIP CODE	3. AS OF DATE (MM/DD/YYYY) (Date of form preparation)
4. ACADEMIC SCHOOL Arkansas State University - Jonesboro	5. CREDIT HOURS Select Semester or Quarter (S/Q) Semester		6. GRADE POINT AVERAGE (GPA)
a. IDENTIFICATION (Check one):	a. Total required for degree: 120 (1) ROTC Hours that do not count: 20 (2) Total Hours Rqd for NAPS: 140 Normal Academic Progression Standard: 18 b. Credits toward degree Comp to date: _____ c. Transfer Credits accepted: _____ d. Remaining for Degree: 140 e. Number of authorized S/Qs: 8		Term: _____ Curr GPA: _____ CUM: _____ Term: _____ Curr GPA: _____ CUM: _____ Term: _____ Curr GPA: _____ CUM: _____ Term: _____ Curr GPA: _____ CUM: _____ Term: _____ Curr GPA: _____ CUM: _____
Host <input checked="" type="checkbox"/> Extension Center <input type="checkbox"/> Cross-Enrolled <input type="checkbox"/>	c. HOST FICE 001090		Term: _____ Curr GPA: _____ CGPA: _____ Term: _____ Curr GPA: _____ CGPA: _____ Term: _____ Curr GPA: _____ CGPA: _____ Term: _____ Curr GPA: _____ CGPA: _____
b. HOST SCHOOL Arkansas State University - Jonesboro			

7. TERM, YEAR, COURSE NUMBER, COURSE TITLE, COURSE CREDIT HOURS, CREDITS THAT COUNT TOWARDS ACADEMIC DEGREE, AND ACHIEVED GRADES.

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8. STUDENT INITIALS & DATE:	TERM 1: _____	TERM 4: _____	TERM 7: _____
(Have the student initial and date beside each term to indicate they have been counseled)	TERM 2: _____	TERM 5: _____	TERM 8: _____
	TERM 3: _____	TERM 6: _____	TERM 9: _____

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7. TERM, YEAR, COURSE NUMBER, COURSE TITLE, COURSE CREDIT HOURS, CREDITS THAT COUNT TOWARDS ACADEMIC DEGREE, AND ACHIEVED GRADES. (CONTINUED)

g.

Term:		Fall		Year: 23	
No.	Course Title	Hrs.	Cts.	Grd.	
MSL3053	Warfighting Functions	3			
Total Term Hours:		3			

h.

Term:		Spring		Year: 24	
No.	Course Title	Hrs.	Cts.	Grd.	
MSL3063	Leadership Small Unit Ops				
Total Term Hours:					

i.

Term:		Summer		Year: 24	
No.	Course Title	Hrs.	Cts.	Grd.	
	Advanced Camp - Fort Knox, KY				
Total Term Hours:					

j.

Term:		Fall		Year: 24	
No.	Course Title	Hrs.	Cts.	Grd.	
MSL4073	The Army Officer	3			
Total Term Hours:		3			

k.

Term:		Spring		Year: 25	
No.	Course Title	Hrs.	Cts.	Grd.	
MSL4083	Company Grade Leadership	3			
Total Term Hours:		3			

l.

Term:		Summer		Year: 25	
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

m.

Term:		Fall		Year: 25	
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

n.

Term:		Spring		Year: 26	
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

o.

Term:		Summer		Year: 26	
No.	Course Title	Hrs.	Cts.	Grd.	
Total Term Hours:					

9. REVIEW: All of the above courses are required (as minimum) for the completion of the degree: Yes No (if no, list exceptions on reverse side of this form).
 Completion should result in _____ degree, during (Month, Year): _____

10. SIGNATURE OF STUDENT:

11. DATE: (MM/DD/YYYY)

12. SIGNATURE OF REGISTRAR AND EXAMINER OF CREDENTIALS (OR OTHER INSTITUTION CERTIFYING OFFICIAL):

13. DATE: (MM/DD/YYYY)

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STATEMENT OF UNDERSTANDING

We, the undersigned, hereby declare that the program outlined on the worksheet (on the reverse side of this statement) that

Cadet _____ is about to under take a formally structured program approved by _____
(FULL NAME, Last, First, MI) (Name of University or College)

designed to meet the requirments of a _____ degree; that the degree to be attained is the culmination of an
(Type of Degree)

undergraduate college program of at least four years; and that the remaining credit hours shown on the worksheet are necessary either to fulfill discipline requirements or to fulfill credit hour requirements, or both, for the attainment of the degree. If the Cadet is an ROTC Scholarship participant, the scholarship will be in force for the number of semesters indicated in Block 5.

(Date) (MM/DD/YYYY)

(CADET SIGNATURE)

(Date) (MM/DD/YYYY)

(PROFESSOR OF MILITARY SCIENCE SIGNATURE)