

Last Name: _____ First Name: _____ Date: _____

ID#: XXX-XX-_____ MAJOR: MARITIME TECHNOLOGY (41A)

I. DEVELOPMENTAL REQUIREMENTS:

- | | |
|---|--|
| ☞ Student <u>Passed/Exempt</u> Reading CUNY Examination | ☞ Student <u>Failed</u> Reading CUNY _____ score |
| ☞ Student <u>Passed/Exempt</u> Writing CUNY Examination | ☞ Student <u>Failed</u> Writing CUNY _____ score |
| ☞ Student <u>Passed</u> CUNY Math or COMPASS | ☞ Student <u>Failed</u> CUNY Math or COMPASS
Old Test: Parts 1 and 2 _____
(Total Score)
COMPASS: M1 ___ M2 ___ M3 ___ M5 ___ |

II. COLLEGE REQUIREMENTS: 9 credits

Note: All courses with an asterisk (*) have a pre-requisite.

Course	Credits	Course	Credits	Course	Credits	Course	Credits
☞ Eng 12*		☞ Eng 24*		☞ HE 20		☞ HE 35	

(One (1) Writing Intensive course in any discipline from any category below is required. Such courses are designated "W".) Participation in a Learning Community that includes ENG 12 also satisfies this requirement.

III. DEPARTMENT REQUIREMENTS:

Note: All courses with an asterisk (*) have a pre-requisite.

Course	Credits	Course	Credits	Course	Credits	Course	Credits
☞ MT 33		☞ MT 46		☞ MT 52		☞ MT 55	
☞ MT 34*		☞ MT 50		☞ MT 53		☞ BA 60	
☞ MT 43		☞ MT 51		☞ MT 54		☞ EPS 32*	

IV. GENERAL EDUCATION REQUIREMENTS: 13 – 14 credits

Nine (9) credits from Groups A and B: A minimum of three (3) credits from each group plus three (3) more credits in another discipline from either Group A or B.

- | | |
|--|----------------------|
| A. <u>Arts and Humanities</u> | 3 – 6 credits |
| Disciplines: Art – Foreign Language – Literature – Music – Philosophy – Speech – Theatre Arts
<i>Excluded are Art studio, Music studio, Theatre production & skills courses</i> | |
| B. <u>Behavioral and Social Sciences</u> | 3 – 6 credits |
| Disciplines: Anthropology – Economics – History – Political Science – Psychology – Sociology | |
| C. <u>Mathematics and Sciences</u> | 3 – 4 credits |
| Laboratory science satisfied by Department Requirement.
A mathematics course is required. | |

ELECTIVES: 5 – 7 credits to meet total of 60 credits

SEMESTER: Fall _____ Spring _____

MODULE: Winter _____ Summer _____

Course	Credits/Equated Credits
1.	
2.	
3.	
4.	
5.	

Course	Credits/Equated Credits
1.	
2.	

MODULE: Winter _____ Summer _____

Course	Credits/Equated Credits
1.	
2.	

____ As a student who is part of the Access-Ability Center, I know that I am advised to return to room D-205 for any course modifications or discussion of accommodations.

I have reviewed and understand the information listed above.

Advisor Signature: _____ Student Signature: _____ Date: _____