University of Arkansas
Community College at Morrilton
Department of Air Conditioning, Heating, and Refrigeration Technology
Degree Options: CP, TC, & AAS

Student ID: _____ Name: _____ Date: _____

Major: CP ☐ TC ☐ AAS ☐ Catalog used for Graduation _____ Expected Graduation: _____

If the student is currently enrolled in a course, please enter semester/yr (ex. F20 or Sp21). If the course has been completed, enter the grade earned to the right of ✓.

Fall / Spring Start

Semester 1 – CP | **Completed Grad App – CP ☐**

Course ID	Course Title	Cr	Enrolled	Complete/Grade	
ACR 1404	AC & Heating Systems I	4		☐	
ELEC 1204	Fundamentals of Elect.	4		☐	
ENG 1003	Applied Technical Writing	3		☐	
TECH 1001	Industrial Safety	1		☐	
TECH 1101	OSHA Basic	1		☐	
WLD 1202	Craft Skills	2		☐	
	Credit Hours Semester 1:	**15**			

Semester 2 – TC | **Completed Grad App – TC ☐**

Course ID	Course Title	Cr	Enrolled	Complete/Grade	
ACR 1103	Refrig Sys & Components	3		☐	
ACR 1503	AC & Heating Systems II	3		☐	
*CIS 1013	Intro to Computers	3		☐	
MATH 1253	Applied Technical Math	3		☐	
TECH 1303	Schematics	3		☐	
	Credit Hours Semester 2:	**15**			

Fall Semesters / Spring Semesters

Semester 3

Course ID	Course Title	Cr	Enrolled	Complete/Grade	
ACR 2014	AC & Heating Systems III	4		☐	
ACR 2024	Commercial HVAC-R	4		☐	
CIS 1113	Network Essentials	3		☐	
ELEC 2113	Motor & System Controls	3		☐	
ENG 1013	Composition I – 3rd or 4th semester	3		☐	
	Credit Hours Semester 3:	**14 - 17**			

Semester 4 - AAS | **Completed Grad App – AAS ☐**

Course ID	Course Title	Cr	Enrolled	Complete/Grade	
ACR 2023	Service Maint. & Trouble. **OR**	3		☐	
ACR 29003L	HVAC/R Internship				
BUS 2313	Professional Development	3		☐	
ELEC2204	Automated Sys & Robotics	4		☐	
ENG 1013	Composition I – if not taken 3rd semester	3		☐	
	Social Science Elective	3			
	Credit Hours Semester 4:	**13-16**			

Comments:

The plan above outlines a recommended sequence for completing the stated degree. Course offerings may change at the discretion of the Dean or the Vice Chancellor of Academic Services. By signing below, the student acknowledges being advised based on the above completion plan for this program.

Advisor (Print) _____ Advisor's Signature _____ Student's Signature