Michigan State University Office of the Registrar

Veterans Certification / Second Bachelor's Degree Program Plan

Name Degree Anticipated Graduation Date						PID Major Date														
															INSTRU	CTION	S			
											include	d; however,	they must l	or the degree liste be identified as su JLD NOT be liste	ch. Reference co					
			ired and/or a select 810, 811, 820,&						ted by areas.											
			nust be submitted ginal course and th			your acade	mic advise	r and associate de	ean. The new											
			ald be submitted to				0 Adminis	tration Building.	Enrollment											
Dept Code	Course Number	Credits	Check if Required Prerequisite	Registrar Use Only Term Taken	Dept Code	Course Number	Credits	Check if Required Prerequisite	Registrar Use Only Term Taken											
	**Requirements by area (see instructions above)								oove)											
Signature Date Academic Adviser						Signature Date Associate Dean														