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6 0 8 , ' _____ 1 DPH: _____
 Home Address: _____ 0 RELOH_3KRQH _____
 Business Address: _____ Business 3KRQH: _____
 6 0 8 Email: _____ \$ G Y L V R U : _____

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CORE COURSES (12 hours)

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TOTAL REQUIRED HOURS

6 W X G H Q W 6 L J Q D W X Date

APPROVED: _____
 Advisor Date

3 U R J U D P ' L U H F W R U Date

NOTE: ANY REVISIONS MUST BE APPROVED BY ADVISOR,
 352*5\$0,5(&725 AND /</(\$66,67\$17 '(\$1.

' L U H F W R D G R 6 W X G L H V Date

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 D O W H U Q D W L Q O H I L E 6 0 H W M L D P S P D H O F R X U V H V) D O O F R X U V H 6 S U L Q J F R X U V H
 W U D F N V I R U F R P S O H W L R Q * U D G X D W L R Q L Q) D O O W H U P * U D G X D W L R Q L Q 6 S U L Q J W H U P R I \ H D