

Last Name: _____ First Name: _____ Date: _____

ID#: XXX-XX-_____

MAJOR: SPEECH COMMUNICATION
(COMMUNICATION STUDIES CONCENTRATION) (55B)

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 |
| | <u>Old Test:</u> Parts 1 and 2 _____ |
| | (Total Score) |
| | <u>COMPASS:</u> M1 _____ M2 _____ M3 _____ M5 _____ |

II. COLLEGE REQUIREMENTS: 7 credits

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

Course	Credits	Course	Credits	Course	Credits
☐ Eng 12*		☐ Eng 24*		☐ HE14	

(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:

Course	Credits	Course	Credits	Course	Credits	Course	Credits
☐ SPE 12		☐ SPE 24		☐ SPE 26		☐ SPE 29	
☐ SPE 21		☐ SPE 25		☐ SPE 27			

IV. GENERAL EDUCATION REQUIREMENTS: Minimum of 23 credits

- A. **Arts and Humanities**
Foreign Language – Literature – Philosophy 4 – 6 credits
- B. **Behavioral and Social Sciences**
Anthropology – Psychology – Sociology 6 credits
Economics – History – Political Science 6 credits
- C. **Mathematics and Sciences** 7 – 8 credits
A mathematics course **and** a laboratory science course selected from:
Biology – Chemistry – Earth & Planetary Science – Physics

ELECTIVES: 6 – 9 credits sufficient to meet required 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: _____