

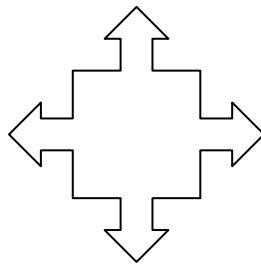
NAME _____

LBCC GRADUATION WORKSHEET 2009-2010 ID.NO _____

**CERTIFICATE One-Year
Office Specialist**

C1 5087

INSTRUCTIONS: Use this worksheet to track your progress toward graduation. You must be able to check off all the boxes on the checklist to receive this certificate. The college catalog and your advisor are two resources you can turn to if you need help. When you are nearing completion, meet with your advisor and have him or her sign this form. You should apply for graduation one term prior to the term you and your advisor determine you will have met the requirements for completion. **When you apply for graduation you must attach this form to your application. Your application is incomplete without this form signed by your advisor.**



Degree Evaluator

Date

FOR OFFICE USE ONLY

Credit Toward This Degree

Total Cr _____ LBCC Cr _____ GPA _____ Approved Denied

Registrar

Date

C1 5087A BH

Advisor Instructions: This is the student's official record of their progress. The student must be present this form to the Admissions Office when they apply for graduation. Please address each requirement by checking off completed courses, indicating which courses the student plans to take, and clearly documenting substitutions or waivers.

PROGRAM REQUIREMENTS ARE APPROVED BY THE DEPARTMENT ADVISOR. CHANGES MUST ALSO BE APPROVED BY DIVISION DIRECTOR OR DEAN

Official Use		Credits	Waivers/ Substitutions	Advisor Initials	Date Approved
<input type="checkbox"/>	CIS 125D	Intro to Databases.....	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	CIS 1250	Intro to Windows.....	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	CIS 125P	Intro to Presentations.....	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	CIS 125S	Intro to Spreadsheets.....	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 2.500	Business Orientation	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 2.652	Filing.....	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 104	Business Math.....	2	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 109	Job Success Skills	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 110	Editing Skills for Info Processing	3	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 116	Administrative Procedures	4	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 122	Formatting.....	2	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 123A	Typing Skillbuilding.....	2	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 123B	Advanced Typing Skillbuilding	2	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 130	Numeric Keyboarding: Speed & Accuracy	1	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 202	Word Processing for Business: MS Word.....	3	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 203	Advanced Word Processing	3	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 210	Integrated Software Applications	3	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 215	Communications in Business	4	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 225	Applied Document Processing.....	3	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 241	Computerized Records Management.....	3	<input type="checkbox"/>	_____

Choose at least 4 credits from the following list:

<input type="checkbox"/>	BA 101	Intro to Business	4	<input type="checkbox"/>	_____
<input type="checkbox"/>	BA 2.530	Practical Accounting I	4	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 2.505	Voice Recognition.....	2	<input type="checkbox"/>	_____
<input type="checkbox"/>	OA 205	Desktop Publishing.....	3	<input type="checkbox"/>	_____

Admissions & Records will perform a final evaluation to ensure all courses have been completed with appropriate grades before this certificate is awarded to the student. Requirements such as general education, total credits and grade point average must be approved by the Registrar.

DEPARTMENT ADVISOR

Program requirements/proposed substitutions and waivers meet with my approval. Reasons for any changes are indicated and initialed on the appropriate line above.

DIVISION DIRECTOR or DEAN

Changes and/or substitutions in the program requirements have my approval.

Program Advisor Signature Date

Division Director or Dean Signature Date