



College of Agriculture, Food and Environmental Sciences

### FORMAL STUDY PLAN

Student Name \_\_\_\_\_ Date \_\_\_\_\_

EMPL ID # \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

ACADEMIC PROGRAM: **M.S. in**  Agribusiness  Agriculture  Forestry Sciences

**SPECIALIZATION** (if applicable) \_\_\_\_\_

#### 1. UNDERGRADUATE INFORMATION

Degree held \_\_\_\_\_ Institution \_\_\_\_\_

Date granted \_\_\_\_\_ Major \_\_\_\_\_ Admissions GPA \_\_\_\_\_

**2. GRADUATE ADMISSION**  Classified  Conditional (list conditions below):

Qtr/Yr admitted to Cal Poly \_\_\_\_\_

Qtr/Yr first work completed on plan \_\_\_\_\_

Qtr/Yr 7-yr limit for degree will expire \_\_\_\_\_

**3. STUDY PLAN:** (List transfer or extension courses in Part A of this section; Cal Poly courses in Part B.)

| A. Course | Units | Grade | School | Qtr/Yr | Course | Units | Grade | School | Qtr/Yr |
|-----------|-------|-------|--------|--------|--------|-------|-------|--------|--------|
| _____     | _____ | _____ | _____  | _____  | _____  | _____ | _____ | _____  | _____  |
| _____     | _____ | _____ | _____  | _____  | _____  | _____ | _____ | _____  | _____  |
| _____     | _____ | _____ | _____  | _____  | _____  | _____ | _____ | _____  | _____  |

| B. Course | Units | Grade | Qtr/Yr | Course | Units | Grade | Qtr/Yr |
|-----------|-------|-------|--------|--------|-------|-------|--------|
| _____     | _____ | _____ | _____  | _____  | _____ | _____ | _____  |
| _____     | _____ | _____ | _____  | _____  | _____ | _____ | _____  |
| _____     | _____ | _____ | _____  | _____  | _____ | _____ | _____  |
| _____     | _____ | _____ | _____  | _____  | _____ | _____ | _____  |
| _____     | _____ | _____ | _____  | _____  | _____ | _____ | _____  |

If courses above have variable title/content, asterisk (\*) them and give course information below:

Course \_\_\_\_\_ Name \_\_\_\_\_ Course \_\_\_\_\_ Name \_\_\_\_\_

**TOTAL UNITS IN PROGRAM** \_\_\_\_\_

Comprehensive Examination(s): Oral  Required (Written:  Yes  No)  
Special Requirements \_\_\_\_\_

#### 4. SIGNATURES:

Student \_\_\_\_\_ Date \_\_\_\_\_ Comm. Chair \_\_\_\_\_ Date \_\_\_\_\_

Comm. Member \_\_\_\_\_ Date \_\_\_\_\_ Comm. Member \_\_\_\_\_ Date \_\_\_\_\_

Associate Dean \_\_\_\_\_ Date \_\_\_\_\_ RGP \_\_\_\_\_ Date \_\_\_\_\_