Please refer to the PCP PowerPoint instructions, available for download on the UCA Veteran Services website, for detailed instructions on how to properly complete this form. If you require further assistance or have questions, please come by the Veteran Services office in Harrin Hall room 223 or call (501) 852-2999 to schedule an appointment with a student admin.

Program Completion Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Student ID #:** | |  | | **Chapter Number:** |  |
| **Department:** | |  | | **Degree:** |  |
| **Major:** | |  | |  |  |
| **Track/Emphasis:** | |  | |  |  |
| **Does this program require a minor? (Yes/No)** | | |  |  | |
| **Minor:** |  | | |  | |

**This degree program requires a total of semester credit hours, including at least 40 upper-division credit hours.**

Minor Credits: (if applicable to you) (Credit hours:)

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Transfer Credit: (if applicable to you) (Credit hours:)

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Year 1

Fall 20XX–(credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Spring 20XX–(credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Year 2

Fall 20XX –(credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Spring 20XX–(credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Year 3

Fall 20XX –(credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Spring 20XX– (credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Year 4

Fall 20XX – (Credit hours: )

| Subject | Number | Title | Hours | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Spring 20XX– (credit hours: )

| Subject | Number | Title | SCH | Grade |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signed – Student |  | Date |
|  |  |  |
|  |  |  |
| Signed – VA Certifying Official |  | Date |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signed – Student Admin that Reviewed |  | Date |

**Contact Information**  
  
Harrin Hall, Room 223

University of Central Arkansas  
Conway, AR 72035  
501-852-2999  
[veteranservices-a@uca.edu](mailto:veteranservices-a@uca.edu)