University of California, Berkeley College of Environmental Design

PROGRAM PLANNING FORM

Student Name: _____ SID: _____

Email Address: _____ Telephone: _____

Please check all that apply:

☐ Simultaneous Degree ☐ Excess Semester/Units ☐ Change of Major ☐ Minor ☐ Probation
☐ Change of College into Environmental Design ☐ Readmission: Fall _____ Spring _____

Major(s): _____ Minor: _____

Expected Graduation Date: _____ Expected Total Units: _____

PROPOSED SCHEDULE OF CLASSES:
Beginning with the current term, indicate all courses you plan to take, including those needed to complete major, college/school, and University requirements.

Summer _____	Units	Fall _____	Units	Spring _____	Units
Total		Total		Total	

Summer _____	Units	Fall _____	Units	Spring _____	Units
Total		Total		Total	

Summer _____	Units	Fall _____	Units	Spring _____	Units
Total		Total		Total	

Summer _____	Units	Fall _____	Units	Spring _____	Units
Total		Total		Total	

REQUIRED SIGNATURE(S)

_____ _____
Student Date Major Advisor Date

_____
Major Advisor Date