

# Cuyamaca College Student Education Plan

Name: \_\_\_\_\_ ID# \_\_\_\_\_

Major: \_\_\_\_\_  Certificate  AA  ADT  CSU Breadth  IGETC

Transfer To: \_\_\_\_\_ Catalog Year \_\_\_\_\_  Veteran  Athlete

Semester/Year	Units

Semester/Year	Units

Summer/Year	Units

Semester/Year	Units

Semester/Year	Units

Summer/Year	Units

Semester/Year	Units

Semester/Year	Units

Comments

Counselor \_\_\_\_\_

Date \_\_\_\_\_