University of Arkansas
Community College at Morrilton
Department of Air Conditioning, Heating, and Refrigeration Technology
Degree Options: CP, TC, & AAS

Student ID: _____ Name: _____ Date: _____

Major: CP ☐ TC ☐ AAS ☐ Catalog used for Graduation _____ Expected Graduation: _____

If the student is currently enrolled in a course, please enter semester/yr (ex. F20 or Sp21). If the course has been completed, enter the grade earned to the right of ✓.

Fall / Spring Start

Fall Semesters

Semester 1 – CP		Completed Grad App – CP ☐			
Course ID	**Course Title**	**Cr**	**Enrolled**	**Complete/Grade**	
ACR 1404	AC & Heating Systems I	4		☐	
ELEC 1204	Fundamentals of Elect.	4		☐	
ENG 1003	Applied Technical Writing	3		☐	
TECH 1001	Industrial Safety	1		☐	
TECH 1101	OSHA Basic	1		☐	
WLD 1202	Craft Skills	2		☐	
Credit Hours Semester 1:		**15**			

Semester 3					
Course ID	**Course Title**	**Cr**	**Enrolled**	**Complete/Grade**	
ACR 2014	AC & Heating Systems III	4		☐	
ACR 2003	Commercial Refrigeration	3		☐	
ACR 2113	HVACR Motor & System Controls	3		☐	
CIS 1113	Network Essentials	3		☐	
ENG 1013	Composition I – 3rd or 4th semester	3		☐	
Credit Hours Semester 3:		**16**			

Spring Semesters

Semester 2 – TC		Completed Grad App – TC ☐			
Course ID	**Course Title**	**Cr**	**Enrolled**	**Complete/Grade**	
ACR 1213	HVACR Systems & Components	3		☐	
ACR 1914	AC & Heating Systems II	4		☐	
*CIS 1013	Intro to Computers	3		☐	
MATH 1253	Applied Technical Math	3		☐	
TECH 1303	Schematics	3		☐	
Credit Hours Semester 2:		**16**			

Semester 4 - AAS		Completed Grad App – AAS ☐			
Course ID	**Course Title**	**Cr**	**Enrolled**	**Complete/Grade**	
ACR 2023	Service Maint. & Trouble. **OR**	3		☐	
ACR 29003L	HVAC/R Internship				
TECH 2203	Technical Career Development	3		☐	
ACR 2104	Commercial HVAC	4		☐	
ENG 1013	Composition I – if not taken 3rd semester			☐	
	Social Science Elective	3			
Credit Hours Semester 4:		**13**			

Comments:

The plan above outlines a recommended sequence for completing the stated degree. Course offerings may change at the discretion of the Dean or the Vice Chancellor of Academic Services. By signing below, the student acknowledges being advised based on the above completion plan for this program.

_____ _____ _____

Advisor (Print) Advisor's Signature Student's Signature