TO: Dean __________________________, 220 Morrill II

RE: Academic Plan

STUDENT NAME __________________________ STUDENT ID # __________________

STUDENT EMAIL ____________________________ @umass.edu

The above student has met with me and we have established the following semester by semester academic plan which will allow the student to complete the requirements for the major in a timely manner.

Courses needed to fulfill requirements for ____________________________ major:

Advisor: __________________________ Date: __________________________