

Student Name: FY: **Local Program Name: Enterprise Network Associate** Student Type: Schedule Type: Cohort/Block Number: Distance CTSO HOURS: **Education** Campus Block/Instructor(PID): ADDITIONAL BREAK/INTERSSION DATES: ВРА 0% Day: Tuesday Wednesday Thursday Friday Start Date: Class Schedule: Hours: End Date: OCAS Code: CIP Code: CM Code: SOC Code: 15-1152 11.1002 ACAD & COURSE # OCAS COURSES THEORY LAB TOTAL START DATE END DATE Grade Notes Networking Associate 1 90 170 260 Networking Associate 2 205 265 TOTAL COMPLETED HOURS 150 375 525

Comments:

In order to complete the academic program, students must complete all curriculum hours by the program end date.

All hours must be face to face and may occur in the classroom, laboratory, or at other locations as assigned.

Hours completed outside of the scheduled class time will be supervised, documented,
and recorded within the district attendance system.

A student may participate in Work Based Experiences upon meeting the stated requirements and business and industry availability.

	B & I Certifications		
	Certification Name	Number	A-F?
Primary: Additional:	CCNA	N/A	N
Additional:			
	SIGNATURES:		

Student:

Instructor:

Coordinator:

Administrative: