

Student Name:

FY:

Local Program Name: Event Planning

Student Type:

Schedule Type:

Cohort/Block Number:

Campus: OWA

Block/Instructor(PID):		CTSO	Distance Education	HOURS: 08:00 - 10:50 A.M. 12:00 - 2:50 P.M.
Class Schedule:	Day: Monday Tuesday Wednesday Thursday Friday	SkillsUSA		ADDITIONAL BREAK/INTERSSION DATES:
Weeks of Instruction	Hours:	OCAS Code: 9428	CIP Code: 52.0907	CM Code: HT0056000
				SOC Code: 13-1121

COURSE #	OCAS	ACAD & OHLAP	COURSES	THEORY	LAB	TOTAL	START DATE	END DATE	#DAYS	Grade	Notes
			Event & Project Planning	40	80	120					
			Event Sales & Marketing Fundamentals	40	50	90					
			Leadership & Customer Service	20	10	30					
			Hospitality Business Management	25	20	45					
TOTAL HOURS				165	180	345					

			Event Design, Production & Technology	30	45	75					
			Conference Planning	40	50	90					
			Hospitality in Oklahoma	10	20	30					
			Event Planning Capstone	0	60	60					
TOTAL HOURS				80	175	255					

TOTAL COMPLETED HOURS 245 355 600

B & I Certifications		
Certification Name	Number	A-F?
Primary: Certified Guest Service Professional (CGSP)	7527	Y
Additional: CVENT Student Certification	*	N
OSHA 10		N
American Red Cross First Aid,CPR, and AED		N

SIGNATURES:

Student: _____

Instructor: _____

Coordinator: _____

Administrative: _____

Comments:
In order to complete all hours of the academic program, students must complete additional ___ hours outside of the scheduled class time. Students will receive a written plan for these hours.