

Student Name:  
 Local Program Name: HVAC Technician  
 Student Type:  
 Schedule Type:  
 Cohort/Block Number:  
 Campus

FY:

Block/Instructor(PID):		CTSO	Distance Education	HOURS: 8:00 AM-10:50 AM 12:00 PM-2:50 PM				
Class Schedule:	Day: Hours:	Monday	Tuesday	Wednesday	Thursday	Friday	SkillsUSA	ADDITIONAL BREAK/INTERSSION DATES:
Weeks of Instruction	OCAS Code: 9059	CIP Code: 47.0201	CM Code: AC0040008	SOC Code: 49-9021	Start Date:	End Date:		

COURSE #	OCAS	ACAD	OHLAP	COURSES	THEORY	LAB	TOTAL	START DATE	END DATE	#DAYS	Grade	Notes
				HVAC/R Safety, Tools, & Equipment	10	20	30					
				HVAC/R Preventive Maintenance	5	10	15					
				Thermodynamics & Heat Transfer	20	40	60					
				Refrigerant Recovery	5	10	15					
				Refrigerants & Lubricants	5	10	15					
				Refrigerant Retrofits	5	10	15					
				Piping & Piping Practices	15	30	45					
				Electricity for HVAC/R	20	40	60					
				Professional Service	5	10	15					
				Load Calculations	5	10	15					
				Air Handling	15	30	45					
				Indoor Air Quality	5	10	15					
				HVAC/R Install & Start-Up Residential	40	80	120					
				HVAC/R Codes, Regulations, & Standards	10	20	30					
				HVAC Workforce Staging	15	15	30					

**1st SEMESTER TOTAL HOURS 180 345 525**

				Heat Pumps	10	20	30					
				HVAC/R Solid State Electronics	10	20	30					
				Heating Systems	40	80	120					
				HVAC/R Controls 1	10	12	22					
				Refrigerant System Components	30	60	90					
				HVAC/R Controls 2	10	13	23					
				Air Conditioning Systems	40	80	120					
				HVAC Service & Troubleshooting	30	60	90					

**2nd SEMESTER TOTAL HOURS 180 345 525**

**TOTAL COMPLETED HOURS 360 690 1050**

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.			
B & I Certifications			
	Certification Name	Number	A-F?
Primary:	HVAC Technician	3401	Y
Additional:	EPA 608 Certification	3457	N
	Process Piping Technician	3402	Y
	Refrigeration Technician	3403	Y
	Sheet Metal Technician	3404	Y
	Residential Industry Competency Exam	3455	Y
	OSHA 10	*	*

SIGNATURES:

Student: \_\_\_\_\_

Instructor: \_\_\_\_\_

Coordinator: \_\_\_\_\_

Administrative: \_\_\_\_\_