

Student Name:

FY:

Local Program Name: Restaurant & Lodging Management

Student Type:

Schedule Type:

Cohort/Block Number:

Campus: OWA

Offsite Location:

Block/Instructor(PID):

CTSO	Distance Education	HOURS: 08:00 A.M. - 10:50 A.M. 12:00 P.M. - 2:50 P.M.
SkillsUSA		ADDITIONAL BREAK/INTERSSION DATES:
Class Schedule:		Start Date:
Day:	Monday	Tuesday
Hours:	Wednesday	Thursday
	Friday	End Date:
Weeks of Instruction:	OCAS Code: 9430	CIP Code: 52.0901
	CM Code: HT0026000	SOC Code: 11-9081

COURSE #	OCAS	ACAD & OHLAP	COURSES	THEORY	LAB	TOTAL	START DATE	END DATE	#DAYS	Grade	Notes
			Leadership & Industry Relations	60	60	120					
			Restaurant & Hotel Operations	75	75	150					
			Restaurant & Hotel Management	75	75	150					
			Restaurant & Lodging Major Capstone	20	100	120					
TOTAL COMPLETED HOURS				270	330	600					

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: Certified Guest Service Professional (CGSP)	7527	Y
Additional: ServSafe	7461	Y
Hospitality & Tourism Management Program Year 1 Exam	7460	Y
Hospitality & Tourism Management Program Year 2 Exam	7463	Y
American Red Cross First Aid,CPR, and AED	*	*

SIGNATURES:

Student: _____

Instructor: _____

Coordinator: _____

Administrative: _____