MISSOURI STATE UNIVERSITY - Missouri S&T Cooperative Program Advisor Approved Program of Study

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SUBJECT	COURSE NUMBER		COURSE TITLE	<u> </u>	CREDIT HOURS	SEMESTER / YEAR
ENG	110		EXAMPL	E	3	Fall 2015
				Total Credit Hour	s:	
Student Signature:					Date: _	
dvisor N dvisor S	Name (Print):	NT APPROVAL SI	First	MI	Date: _	
ept. Hea	ad/Prog. Coord N					
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Date: _____

Dept. Head/Prog. Coord Signature: