COLLEGE OF
Natural Resources
UNIVERSITY OF CALIFORNIA, BERKELEY

PROGRAM PLANNING FORM

Office of Instruction & Student Affairs, 260 Mulford Hall
Berkeley, CA 94720-3100 • Tel (510) 642-0542 • Fax (510) 643-3132

Name: _____ SID: _____
Last First Middle

Address: _____ Phone #: _____
Street City State Zip

Major: _____

PROPOSED SCHEDULE OF CLASSES:
Beginning with the **current** term indicate all courses you plan to take, including those needed to complete major(s), college/school, and University requirements.

Fall _____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

Fall _____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

Fall _____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

NOTE: The Undergraduate Petition Change of College, Major, or Curriculum form will not be accepted without the program planning form.

_____ _____
Student's Signature Date Major Advisor's Signature Date

Revised September 15, 2006