

Transfer Program Individual Learning Plan

Student Name:	Term Applying for Transfer To University:
Major:	Country of Origin:
Last Year of School Completed In U.S.:	Counselor:
I.D.#:	G.P.A.:

Term: _____			Term: _____			Term: _____		
Course	Units	Grade	Course	Units	Grade	Course	Units	Grade
TOTALS			TOTALS			TOTALS		

Term: _____			Term: _____			Term: _____		
Course	Units	Grade	Course	Units	Grade	Course	Units	Grade
TOTALS			TOTALS			TOTALS		

Term: _____			Term: _____			Term: _____		
Course	Units	Grade	Course	Units	Grade	Course	Units	Grade
TOTALS			TOTALS			TOTALS		