See your advisor to declare your major.

The prerequisites and corequisites of the degree requirements are subject to change.

MATH/ENGL prerequisite/co-requisite courses if student does not meet placement requirements:

**Prerequisites:** ENGL0263 _______ MATH 0233_______MATH 0304 ______

**Corequisites:** ENGL 0201______ MATH 0301 ________

**Required eight hours:**

**Courses**

EMT 1408 Emergency Medical Technology-Basic 8 Hours Grade_____

**Total Hours: 8**

A grade of C or better is required in ALL courses applicable to this program.

**Transfer Course Information**

The Arkansas Course Transfer System (ACTS) contains information about the transferability of courses within Arkansas public colleges and universities. Students are guaranteed the transfer of applicable credits and the equitable treatment of the application of credits for the admissions and degree requirements. Courses transferability is not guaranteed for courses listed in ACTS as "No Comparable Courses." ACTS-Arkansas Course Transfer System [http://acts.adhe.edu](http://acts.adhe.edu) -select Course Transfer. See Acceptance of Transfer Credits section of the current academic catalog for a complete list of transfer provisions.

**Student Degree Program Requirements**

A student’s degree program requirements are those specified in the catalog in effect at the time of declaration of program major. Students must meet the above program requirements and the graduation requirements as indicated by institutional and college policy. The program can be changed only with the approval of the official advisor. If original courses are eliminated, students may be required to meet new curriculum requirements in the degree program. If students are not enrolled for two or more consecutive terms (excluding summer terms), they must re-enter under the program requirements of the current catalog. Students are responsible for understanding program requirements and changes. This document is not official until signed and dated by both the student and an authorized university representative.

Student Signature __________________________________________________________ Date ____________________

Advisor Signature __________________________________________________________ Date ____________________