

Oglala Lakota College Business Department

Student Name:		Student ID:	
Declared Major:	Business Administration	Declared Emphasis:	
General Admission Acceptance Date:		Degree Option Acceptance Date:	

Fall	Credit Hrs.	Spring	Cred it Hrs.	Fall	Credi t Hrs.	Spring	Credi t Hrs.	Fall	Credi t Hrs.	Total
Total credits										

I understand that the Individual plan of study is a projected plan based on the student enrollment each semester and successful completion of the courses as defined by Department requirements. I understand that it is my responsibility to contact my faculty advisor if anything has changed in my schedule to rearrange my schedule.

Student
Date

Faculty Advisor/Chair
Date