

Name: _____

Major: _____

ID #: _____

Minor: _____



4 YEAR PLANNING WORKSHEET

Fall Semester – Year 1		Spring Semester – Year 1		Summer (optional) – Year 1	
Courses	Pre- Requisites	Courses	Pre-Requisites	Courses	Pre-Requisites
Total semester hours:		Total semester hours:		Total semester hours:	
Fall Semester – Year 2		Spring Semester – Year 2		Summer (optional) – Year 2	
Total semester hours:		Total semester hours:		Total semester hours:	
Fall Semester – Year 3		Spring Semester – Year 3		Summer (optional) – Year 3	
Total semester hours:		Total semester hours:		Total semester hours:	
Fall Semester – Year 4		Spring Semester – Year 4		Summer (optional) – Year 4	
Total semester hours:		Total semester hours:		Total semester hours:	
				Total hours completed:	

Tools that will help you complete this worksheet:

- Academic Requirement Report – MyBenU Account
- University Catalog – www.ben.edu/registrar
- AP/Dual Credit/Transfer Credit
- Pencil

Notes: