

Advisor Signature

Basic Certificate of Proficiency Allied Health

2025-2026 Degree Plan 6-9 credit hours required

| Name | ame Anticipated Graduation Semester | | | |
|---|--|----------------------|----------------------|---------------|
| Original placeme | ent in developmental education courses is determined by ACT, | Accuplacer, or SAT | test scores. I under | stand that if |
| required to enro | II in developmental education courses as a result of my test so | cores and Arkansas I | aw, Act 1101, an add | ditional |
| semester may be | e required to complete my program of study. | | | |
| General Education Core Requirements | | | | |
| Course # | Course Title | Semester | Hours | Grade |
| | Core courses to be selected from: | | | |
| | MEDL 1001 Introduction to Healthcare | | | |
| | MEDL 1003 Medical Terminology | | | |
| | MEDL 1033 Foundations of Anatomy & Physiology | | | |
| | EMS 1013 Anatomy & Physiology for EMS | | 6-9 | |
| | HLTH 2513 Principles of Personal Health | | | |
| | HLTH 2523 First Aid and Safety | | | |
| | MTH 1213 Math for Healthcare Professionals | | | |
| | NRS 2203 Basic Human Nutrition | | | |
| which courses symbol are cor transferability applicable cred | by Act 472 of 2007, I have been informed of the Arkansas will transfer to other Arkansas public institutions. Course asidered ACTS courses. The Arkansas Course Transfer Sylof courses within Arkansas public colleges and universitional equitable treatment in the application of credits ation the ACTS website link can be reached at <a "<br="" href="https://ade.com/https://https://https://ade.com/https://ade.com/https://https://ade.com/https://ade.com/https://https://ade.com/https://https://do.com/https://https://do.com/https://d</th><th>es notated in the d stem (ACTS) conta es. Students are gu for admissions an</th><th>legree plan with the ins information abuse a learn teed the trand degree requirem</th><th>ne " ~="">rout the nsfer of nents. For | | | |
| | by Act 472 of 2007, I have been informed of the Arkansas will transfer to other Arkansas public institutions. | Course Transfer S | ystem, and how to | o determine |
| Student signat | ure Date | | | |
| | | | | |

Date