



## SCTCC PSEO Graduation Plan

Name: \_\_\_\_\_ Grade (when starting PSEO): \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone#: \_\_\_\_\_ High School: \_\_\_\_\_

Do you receive special services or have an IEP in High School? \_\_\_\_\_

Have you received other college credits? (AP, CLEP, CIS, etc.) \_\_\_\_\_

**Planning Ahead**—Do you have a career goal or college major in mind? If no, write Undecided  
\_\_\_\_\_

**Program Choice:** \_\_\_\_\_ AA \_\_\_ Diploma \_\_\_ AAS \_\_\_

**PSEO Start Date:** Fall or Spring **Full Time (12+ credits) or Part Time:** Full Time or Part Time

**High School Requirements fulfilled by SCTCC Courses:** (High school counselor completes)

Will any SCTCC courses be used for high school credits? (Circle one) Yes or No

If yes, which SCTCC course(s) does this student need to complete to fulfill graduation requirements?

<u>High School Requirement</u>	<u>SCTCC Course</u>

*(Please attach additional forms if space is needed)*

**High School Counselor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

This form is to be submitted with all other PSEO application materials OR brought to the PSEO Advising & Registration Day to help with the selection of courses. More information regarding Accuplacer placement testing, eOrientation, and the PSEO Advising & Registration Day will be sent out in checklists and letters via mail. For questions, please contact the PSEO Coordinator, Molly McAlister, at [molly.mcalister@sctcc.edu](mailto:molly.mcalister@sctcc.edu) or (320) 308-6022.

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