

PROGRAM AND AWARD PLANNING FORM

Program: **Air Conditioning/Refrigeration Technology-ACR Level 2 (ACR2)**
Award: **Short-Term Certificate**
Catalog: **2016-2017**

STUDENT NAME _____ **STUDENT NUMBER** _____

Semester/Year	Grade	Required Selection	HRS
		ACR 112 HVACR Service Procedures	3
		ACR 122 HVACR Electrical Circuits	3
		ACR 205 Systems Sizing and Air Distribution	3
		ACR 209 Commercial Air Conditioning Systems	3
Total Semester Credit Hours		12	

Student's Signature	Date	Advisor Signature	Date
---------------------	------	-------------------	------