PROGRAM AND AWARD PLANNING FORM

Program: **Biomedical Equipment Technology (BET)**
Award: **Short-Term Certificate**
Catalog: **2016-2017**

STUDENT NAME_____ STUDENT NUMBER_____

Semester/Year	Grade	Required Selection	HRS
_____	_____	BIO 103 Principles of Biology I	4
_____	_____	ILT 169 Hydraulics/Pneumatics	3
_____	_____	ILT 203 Biomedical Electronics I	3
_____	_____	ILT 204 Biomedical Electronics II	3
_____	_____	ILT 226 BMET Certification Preparation OR Certification Preparation Elective	3
_____	_____	ILT 294 Biomedical Electronics Clinical I	3
_____	_____	ILT 295 Biomedical Electronics Clinical II	3

Total Semester Credit Hours **22**

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Student's Signature Date Advisor Signature Date