



Program Completion Guide

BUSINESS ADMINISTRATION: PROJECT MANAGEMENT (CERTIFICATE) (C25120PM)

Student Name: _____ ID #: _____ Date of Enrollment: _____

Section I: Developmental Courses (if needed)

Courses	Scores	Cr.	Prerequisites/ Corequisites	Grade	Notes/Semester
DMA 010 Operations with Integers	<7 on DAP	1	Pre: None		
DMA 020 Fractions and Decimals	<7 on DAP	1	Pre: DMA 010		
DRE 096 Integrated Reading and Writing	104-116	3	Pre: None Co: CIS 070		
DRE 097 Integrated Reading Writing II	117-135	3	Pre: DRE 096 Co: CIS 070		
DRE 098 Integrated Reading Writing III	136-150	3	Pre: DRE 097 Co: CIS 070		

Section II: Project Management Certificate (C25120PM) Course Requirements 12 credit hours: Complete Sections I (as required) and II requirements.

Courses	Cr.	Recommended Semester	Prerequisites/ Corequisites	Semester Registered/ Planned	Semester Completed/ Grade
BUS 137 Principles of Management*	3	1 st year - fall	Pre: DRE 098 or ENG 090 and RED 090		
PMT 110 Intro to Project Management*	3	1 st year - fall	None		
PMT 210 Project Management Issues*	3	1 st year - spring	Pre: PMT 110		
PMT 215 Project Management Leadership*	3	1 st year - spring	Pre: PMT 110		

NOTES: *All courses must be completed with a grade of "C" or better.
 **See course catalog for prerequisite and/or corequisite requirements.

Students please read the following and sign below.

I understand that as an RCC student, I am ultimately responsible for my schedule. I understand that I must complete each course with a grade of "C" or better and follow the established course sequence or my ability to graduate on time may be affected.
 My advisor has information regarding other colleges and transfer opportunities that I can investigate after completing my degree/diploma/certificate, and I understand that if I would like more information I can schedule an appointment with him/her.

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____

Student Name: _____ Student Signature: _____ Date: _____

Advisor Name: _____ Advisor Signature: _____ Date: _____