

Program Completion Guide

ASSOCIATE IN APPLIED SCIENCE - INFORMATION TECHNOLOGY NETWORK MANAGEMENT (C25590D1) NETWORK+ PREP (C25590D2)

Student Name:		ID #	#: Date of	Date of Enrollment:			
Advisor Name:	Contact Information:						
Note: Developmental coursework information.	may be	required. Please ı	refer to the Developmenta	l Education Guid	e for additional		
A. Information Technology: Network+ Prep (Certificate) (C25590D2) Course Requirements 12 credit hours: Complete Section A. Note: Network+ Prep (C25590D2) is a subset of the Network Management (C25590D1) certificate. Students using financial aid should enroll in Network Management (C25590D1).							
Courses	Cr.	Recommended Semester	Prerequisites/ Corequisites	Semester Registered/ Planned	Semester Completed/ Grade		
CTI 120 Network & Sec Foundation	3	1 st year - fall	Pre: MAT 003 Tier 2 or BSP 4003 Tier 2, ENG 002 or BSP 4002 or ENG 111				
CTS 120 Hardware/Software Support	3	1 st year - fall	Pre: MAT 003 Tier 2 or BSP 4003 Tier 2, ENG 002 or BSP 4002 or ENG 111				
NET 125 Introduction to Networks	3	1 st year - spring	Pre: MAT 003 Tier 2 or BSP 4003 Tier 2, ENG 002 or BSP 4002 or ENG 111				
NOS 130 Windows Single User	3	1 st year - spring	Pre: MAT 003 Tier 2 or BSP 4003 Tier 2, ENG 002 or BSP 4002 or ENG 111				
B. Information Technology: Network M and B.	anageme	ent (Certificate) (C25	590D1) Course Requirements	18 credit hours: Co	omplete Sections A		
Courses	Cr.	Recommended Semester	Prerequisites/ Corequisites	Semester Registered/ Planned	Semester Completed/ Grade		
SEC 110 Security Concepts	3	1st year - spring	Pre: CTI 120				
NOS 230 Windows Administration I	3	2 nd year - fall	Pre: NOS 130				
NOTES: *All courses must be completed with **See course catalog for prerequisite Students please read the following and sign below and that as an RCC student, I am ultimate follow the established course sequence or my ab My advisor has information regarding other colleunderstand that if I would like more information	and/or cor ow. ely respon ility to grad ges and tra	equisite requirements. sible for my schedule. I u duate on time may be afi ansfer opportunities that	fected. : I can investigate after completing m	_			
Student Name:		Student Signature:		Date:			
Advisor Name:		Advisor Signature:		Date:			
Student Name:		Student Signature:		Date:			

_ Advisor Signature: _

Revised 5/15/2023

Advisor Name: _

Academic Year: 2023-2024



Student Name:	Student Signature:	Date:
Advisor Name:	Advisor Signature:	Date:
Student Name:	Student Signature:	Date:
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Academic Year: 2023-2024 Revised 5/15/2023