

Program Planning Guide EARLY CHILDHOOD PRESCHOOL (CERTIFICATE) (C55860) (ONLINE)

Student Name:		ID #:	Date of Enrollment:		
Advisor Name:	or Name: Contact Information:				
A Criminal Background check may be required as a	conditio	n of employment in	the early childhood educ	ation field.	
Students must meet eligibility to take college-level Handbook for further information.	coursewo	ork through placeme	ent tests or other measur	es. Please see the Student	
Early Childhood Preschool Certificate (C55860) Co	urse Rec	uirements 16 credit	t hours:		
Courses	Cr.	Recommended Semester	Semester Registered/ Planned	Semester Completed/ Grade	
EDU 119 Introduction to Early Childhood Education*	4				
EDU 131 Child, Family and Community*	3				
EDU 145 Child Development II*	3				
EDU 146 Child Guidance*	3				
EDU 153 Health, Safety and Nutrition* NOTES: *All courses must be completed with a grade of "C"	3				
The courses listed on this program guide are the course to your advisor if you have taken courses at another part of the North Carolina Articulation Agreemed agreement governing transfer credits from North Carolina environment guarantee with the private universities. RichmondCC cannot guarantee with the state of the following and sign below. It understand that as an RCC student, I am ultimately responsible follow the established course sequence or my ability to graduat My advisor has information regarding other colleges and transfer	er college ent. The Carolina o e the tran e for my sol te on time r er opportu	e or university. Please North Carolina Co. community colleges asfer of courses to out hedule. I understand that may be affected. nities that I can investiga	e see the Student Handbo mprehensive Articulation to North Carolina public ut-of-state universities	ook for the courses, which are a statewid universities and participatin with a grade of "C" or better and	
understand that if I would like more information I can schedule				Dato	
Student Name:Advisor Name:	-	_			
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Student Name:	Student S	iignature:		Date:	
Advisor Name:	Advisor S	ignature:		Date:	
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Student Name:	_ Student S	iignature:		Date:	

Academic Year: 2023-2024 Revised 3/15/2023