

Declaration of Academic Program - Career Preparatory Options

Information must be printed or typed in black or blue ink. (Penciled forms will not be accepted.)

Student Name:				
	Last	Firs	st Middle	
Student ID Number:		Date:	Anticipated Graduation Date:_	

AAS (Associate of Applied Science Degree), Certificate of Achievement, Certificate of Specialization - Career and technical degree or certification for students who desire employment after ECC program completion.

Circle appropriate Certificate, Status or Degree

<u>Programs</u>	<u>Degree</u>	Cert. of Achievement	Cert. of Specialization	Notes
Accounting	AAS	AC		
Applied Technology	AAS	AC	SP	
Apprenticeship Skilled Training	AAS			Check with an advisor for more information
Automotive Technology	AAS	AC		Partner Program–Four Rivers Career Center in Washington, MO
Building Construction	AAS	AC		Partner Program–Four Rivers Career Center in Washington, MO
Business	AAS	AC		
Computer Information Systems	AAS	AC		
Computer Information Systems - Network Technician		AC		
Culinary Arts	AAS	AC	SP	
Early Childhood Development	AAS		SP	
Emergency Medical Technician			SP	
Health Information Management	AAS	AC		
Health Information Management – Healthcare Security			SP	
Heating, Ventilation, Air Conditioning and Refrigeration	AAS		SP	
Industrial Engineering Technology	AAS	AC		
Industrial Maintenance			SP	
Law Enforcement	AAS	AC		
Licensed Practical Nurse (LPN)		AC		Pre-Admission - ECC-Rolla
Medical Assistant	AAS	AC		
Medical Lab Technician	AAS			Partner Program – MHPC. Pre-Admission
Nursing	AAS			Pre-Admission
Nursing LPN to RN Bridge Program Option	AAS			Pre Admission – ECC Rolla
Occupational Therapy Assistant	AAS			Partner Program–MHPC. Pre-Admission
Paramedic Technology	AAS	AC		
Precision Machining Technology	AAS	AC		
Precision Machining Technology – CNC		AC		
Radiologic Technology	AAS			ECC-Rolla
Respiratory Care	AAS			Partner Program–MHPC. Pre-Admission
Surgical Technology	AAS			ECC-Rolla
Welding	AAS	AC	SP	ECC Program or Partner Program–Four Rivers Career Center in Washington, MO

I acknowledge that it is my responsibility to understand my academic program and program requirements.

New Assigned Advisor:_____

Student Signature:

AdvisorSignature: