

Education Attainment Plan

This document is for use by programs receiving PDG Grant funding from the Arizona Department of Education. Please have each staff member complete their own plan and obtain the signature of their college advisor/counselor. Then, upload this document in EMAC.

Student Name: _____ Student ID Number: _____

College Attending: _____ Anticipated Graduation Date (Month/Year): _____

Current Highest Level of Education: _____

Course Schedule (complete all sections through anticipated graduation date)

Fall/Winter 2024 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed
Spring/Summer 2025 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed

Fall/Winter 2025 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed
Spring/Summer 2026 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed
Fall/Winter 2026 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed

Spring/Summer 2027 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed
Fall/Winter 2027 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed
Spring/Summer 2028 Course Dates	Course Name and Number (For example, ECE101- Intro to Child Development)	Date Completed

I attest that the above course schedule was developed with and/or reviewed by a representative of the college/university I am attending or plan to attend. I understand that my schedule may change based on availability of courses. However, if a course is not offered during the semester identified I will enroll in and complete the next available course in the above schedule and complete the unavailable course at the earliest opportunity.

Student Name: _____

Student Signature: _____

Date signed: _____

I attest that I am an authorized representative of the college/university identified on page 1 of this document. I have communicated with the above student to develop an education attainment plan and recommend this schedule based on course availability.

College/University Representative Name: _____

College/University Representative Title: _____

College/University Representative Signature: _____

Date signed: _____