

I am currently pursuing an  
 interested in a teaching career  
 (please check one)  Yes  No

## Morehead State University STUDENT TRIAL SCHEDULE

Semester \_\_\_\_\_

SOCIAL SECURITY NUMBER				LAST NAME			FIRST NAME					HLI	CLASS	SCHOOL		
Dept.	Course No.	Soc. No.	Course Title	Audit	Repeat	Credit Hr.	Time	M	T	W	TH	F	S	Edg.	Rec'n	Instructor
							8:00									
							9:00									
							10:20									
							1:30									
							12:40									
							5:00									
							3:00									
							4:00									
							5:20									
							6:30									
<b>TOTAL CREDIT HOURS</b>																
<b>Approved Alternate Courses</b>																

Admitted to Teacher Education Program  Yes  No

Academic Advisor \_\_\_\_\_ Advisor's Signature \_\_\_\_\_

Date Admitted \_\_\_\_\_

Department \_\_\_\_\_