



**Pueblo of Isleta  
Higher Education Program**

P.O. Box 1270 • Isleta, NM 87022 • Phone: (505) 869-9790 • Fax: (505) 869-7573

**Degree Plan**

**This degree plan must be completed by an academic advisor:**

Student Name:	
School ID:	
College / University:	
Program:	
Concentration:	
Expected Graduation Date:	
Faculty Advisor:	
Advisor Signature:	

**COURSES TO BE COMPLETED:**

Semester: \_\_\_\_\_

Course Number:	Credit Hours:	Course Title:
Total Credit Hours:		

Each student is responsible for understanding and completing all requirements for his/her degree. This degree plan has been established in accordance to meeting the student's academic requirement for success. The classes indicated above reflect the students program requirements and will be accepted if **"ONLY"** working towards their educational endeavor. (NOTE: Please **DO NOT** include classes that **DO NOT** pertain to their program requirement, those classes will **NOT** be paid for by the Pueblo of Isleta Higher Education Program)! Pre-requisite classes must be included on degree plan.