FEE WAIVER PROGRAM

CAREER DEVELOPMENT PLAN UPDATE

Name: _____________________________  Semester: ________

Department: ______________________  Year: ________

Working Title: _____________________

Classification: ____________________

Degree Program/Coursework: _________________________

Please Check:  □ Freshman  □ Sophomore  □ Junior  □ Senior  □ Graduate

1. List the classes you completed last semester and your grades:
(Please specify your anticipated grades if they are not available at this time. Upon receipt of your official grades, please send a copy to University Personnel.)

<table>
<thead>
<tr>
<th>Department</th>
<th>Course Title</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Evaluate your progress at this point in time toward your stated long-range career objectives.

Employee Signature: _____________________________  Date: ________________

Supervisor Signature: _____________________________

University Personnel Signature: _____________________________