AFROTC Detachment 847/Angelo State University
Academic Plan Review Sheet

I. Admin Data **Note: Any alterations to Section I requires Det/CC's Approval**

1. Name *(Last, First, MI)*	2. Academic Major	3. Degree Type	4. Term/Year Grad

5. EMPLID (*Filled out by Cadre*)	6. Major Code *(Cadre)*	7. Tech / Non-Tech *(Cadre)*	8. FY / DOC *(Cadre)*

II.Advisor Review Log ***Note:*** *You are confirming that this plan should result in completion of the degree on time (see Sect I, #4)*

9. Review Type	10. Academic Advisor Name	11. Academic Advisor Signature	12. Date	13. Contact Information
Fall - Freshman Year				
Fall - Sophomore Year				
Fall - Junior Year				
Fall - Senior Year				

III.Cadre Review Log

14. Type *(ie. Term / Yr)*	15. Cadre *(Rank / Name)*	16. Cadre Signature	17. Date	18. Cadet Signature
Initial Review				

IV.Cadet Graduation Certification ***(Complete during last graduation term review)***

19. Certification Statement	20. Date	21. Cadet Signature
By signing this, you are certifying that you have successfully completed all degree requirements and will graduate IAW Block 4 above. (**Note: Completed during commissioning process**)		

V.Cadre Notes

Note: Only Check-out cover page to cadet when an Academic Advisor Review is required

V.Cadre Notes Cont.

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Cadet Name	
Page #	out of

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