Name	EMPLID	Date

Email Address	Anticipated Quarter of Completion Fall_____Winter_____Spring_____Summer_____20_____	

Mailing Address	City/State	Zip Code

INFORMATION TECHNOLOGY – Computer Network Support (CNS)

SECTION I				SECTION II	SECTION III	
	This Qtr	**Past Qtr**	**Next Qtr**	**Code: T=Transfer C=Challenge W=Work Exp.**	**Credits**	INSTRUCTIONS 1. Place an "X" in the appropriate column of Section I.
Core Requirements						
BTM 100 Orientation & Career Exploration					2	
BTM 112 Business Applications II					5	2. If applicable, enter codes in Section II.
BTM 113 Business Applications III					5	
BTM 119 Business Communications II					5	
BTM 197 Internship/Work Experience					5	
BTM 260 Project Management					5	3. Submit your application to the Registration Office in Room BE1104 or credentials.central @seattlecolleges. edu.
BTM 275 Computer User Support					5	
IT 130 Network Essentials					5	
IT 141 Intro to Computer Hardware					5	
IT 142 Operating Systems					5	
						NOTES:
				Total Credits	**47**	

Evaluator	Date	Associate Dean	Date		Dean	Date