

Bachelor of Applied Science Degree

Municipal Operations Management

2001 - 2002 Curriculum Check Sheet

College of Technology and Applied Sciences

Student Name _____	ID. Number _____
A.A.S. Degree _____	Date A.A.S. Degree Granted _____
A.A.S. Degree Granting Institution _____ ASU Catalog Year <u>2001-2002</u>	
B.A.S. Academic Department Information and Management Technology	Advisor _____
Number of Upper Division Transfer Credits _____	Expected Graduation Date _____
Institution of Transfer Course Work (Upper Division Only) _____	

General Studies Sequence (19 Hours)

	ASU	Transfer	Transfer From	Grade
Numeracy - ASC 315	3			
Science - ASC 325	4			
Literacy [L1] <small>ENG 301</small>	3			
Humanities [HU] <small>REL 321 [H] [C]</small>	3			
Social Science [SB] <small>POS 310</small>	3			
General Studies [HU or SB] <small>REL 379 [G]</small>	3			

(Suggested courses are tinted) Sub Total 19 Hrs. ____

BAS Degree Summary

Credit Hours

A.A.S. Degree Block Transfer	60
General Studies	
B.A.S. Area Core	
Municipal Operations Mgt	
Assignable Credits	

Total (120 Hours Minimum) ____

B.A.S. Area Core (15 Hours)

	ASU	Transfer	Transfer From	Grade
IMC 346 Management Dynamics	3			
ITM 452 Ind. Human Resource Management	3			
TWC 400 Technical Communications [L2]	3			
STP 420 Intro to Applied Statistics [N2]	3			
GIT 335 Computer Systems Applications	3			

Sub Total 15 Hrs. ____

Advisor Comments

Municipal Operations Management (20 Hours)

	ASU	Transfer	Transfer From	Grade
IMC 331 Quality Assurance	3			
ITM 345 Public Sector Management	3			
ITM 430 Ethical Issues and Leadership Prac.	3			
ITM 480 Organizational Effectiveness	3			
ITM 461 Operations Management	3			
IMC 470 Project Management	3			
ITM 484 Professional Internship	2			

Sub Total 20 Hrs. ____

Total Upper Division Hours ____

Assignable Credits (6 Hours)

	ASU	Transfer	Transfer From	Grade
ITM 494 Training and Development	3			
ITM 480 Organizational Effectiveness	3			

Sub Total 6 Hrs. ____

Total ASU Resident Hours ____

_____ Student Signature	_____ Date	_____ Dean Signature	_____ Date
_____ Advisor/Chair Signature	_____ Date	_____ University Signature	_____ Date