YUBA COLLEGE VETERANS SERVICES EDUCATIONAL PLAN – ASSOCIATE DEGREE Date: _____

Student ID: _____ Name: _____ Effective: FA ☐ SP ☐ SU ☐ 20_____

Major: AA ☐ AS ☐ Nursing _____ Catalog year: _____ Counselor: _____

Dual Objective: ☐ _____

Yuba College General Education Requirements	Course Name, Number & College	UNIT VALUE		
		O	C	N
Area 1A: English Composition				
Area 1B: Communication & Critical Thinking				
Area 2: Math Concepts & Quantitative Reasoning				
Area 3: Arts & Humanities				
Area 4: Social & Behavioral Sciences				
Area 5: Natural Science				
Area 6: Ethnic Studies				
Health Graduation Requirement	DD214	4.00		

Prerequisites/Remedial **over** 99 (**not** to be included in total)	units	**Yuba College Major Requirements** List courses as shown in **catalog** and shown on **transcripts**	UNIT VALUE		
			O	C	N
		Nursing Program: First Semester:			
		NURS 1 Fundamentals of Medical Surgical (9 units)			
		Nursing Program: Second Semester:			
		NURS 2 Introduction Medical Surgical Nursing (7 units)			
		NURS 22 Obstetrical Nursing (3.5 units)			
		Nursing Program: Third Semester:			
		NURS 3 Intermediate Medical Surgical Nursing (5 units)			
Prereq./Remedial/Required for Grad. 99 and **under (To be included in total) →**		NURS 21 Pediatric Nursing (3.5 units)			
		Nursing Program: Fourth Semester:			
		NURS 4 Advanced Medical Surgical Nursing (6.5 units)			
		NURS 33 Psychiatric/Mental Health Nursing (4 units)			
		Total units required for Nursing Program: 38.5			
		Subtotal major & GE requirements	4.00	0.00	0.00
		Subtotal Prereq./Remedial/Required for Grad. #1-99			0.00
ANTICIPATED GRADUATION/ COMPLETION TERM (TERM/YEAR) *		**Additional electives needed** Y ☐ N ☑			
Select Term		**Total**	4.00	0.00	0.00

I have discussed my educational major with a counselor and understand that the courses listed above are required to complete my degree at Yuba College. If I change my educational major, a counselor must complete a new educational plan. VA Benefits are paid for required courses only.

Student Signature _____ Counselor Signature _____

REVISED JULY 2024 C = Completed O = Other College N = Need