

Johnson County Community College
Credit Proposed Program Plan
Work Investment Act (WIA) Training Outline

Training Program: _____

Start Date: _____ **Completion Date:** _____

Student's Name: _____

_____ Semester	_____ Semester
_____ Semester	_____ Semester
_____ Semester	_____ Semester

This plan has been developed based on historical evidence of course availability. The College cannot guarantee the completion date of any program due to variance in course scheduling.

TOTAL NUMBER OF CREDIT HOURS NEEDED TO COMPLETE PROGRAM _____

JCCC Counselor Signature

Date