

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Certificate in Welding Technology (0012)
Department of Applied Technology

Student Name: _____ SSN# _____

Address: _____ Email: _____

_____ Telephone: _____

Catalog Authority: 2004-05 Expected Completion: _____ Advisor: _____

ACT examination credits _____ CLEP examination credits _____

General Education Requirements (3 hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
CMPS 160 Computer Lit - PC (3)	_____	_____

Welding Core Requirements (31 credit hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
WLDT 105 Oxyacetylene Weldng (2)	_____	_____	WLDT 158 SMAW I Grv Opn V-Butt (4)	_____	_____
WLDT 120 Genl Welding Applic (3)	_____	_____	WLDT 162 SMAW I Opn Rt Pipe St (4)	_____	_____
WLDT 122 Safty/Hand & Pwr Tools (2)	_____	_____	WLDT 166 Tig Welding (3)	_____	_____
WLDT 131 Metal Cutting Process (2)	_____	_____	WLDT 202 SMAW II Grv Opn V-Butt (3)	_____	_____
WLDT 155 Shield Metal Arc Wld I (3)	_____	_____	WLDT 204 SMAW II Opn Rt Pipe St (2)	_____	_____
WLDT 157 Shield Metal Arc Wld II (3)	_____	_____			

Other Substitute or Transfer Courses

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
Course (Credit): _____	_____	_____	Course (Credit): _____	_____	_____
Course (Credit): _____	_____	_____	Course (Credit): _____	_____	_____

Total Credit Hours (minimum of 34 required): _____

Original completed on(date): _____ **Copy to Registrar on (date):** _____

Updated on (date): _____ **Grad. Audit sent on (date):** _____

Student Signature: _____ **date:** _____

Advisor Signature: _____ **date:** _____