

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Associate of Applied Science in Computer Technology (0760)
Department of Applied Technology

Student Name: _____	ID#: _____
Address: _____	Email: _____
_____	Telephone: _____
Catalog Authority: _____	Advisor: _____
Expected Completion: _____	

Supporting Coursework (19 hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
ENGL 101 Comp & Rhetoric I	(3) _____	_____	MATH 111 Intermed Algebra	(3) _____	_____
COMM 110 Public Speaking	(3) _____	_____	MATH 131 College Algebra	(3) _____	_____
Pick one lab science course from the following (4 incl lab):			CMPS 111 Computer Lit - PC	(3) _____	_____
CHEM 121, 151, 152;	GEOLOGY 101, 102, 201		Lecture _____	(3) _____	_____
PHSC 101, 115, 171;	PHYS 151, 152, 171, 172		Lab: _____	(1) _____	_____

Computer Technology Core Requirements (33 hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
CTP 100 Intro to OS/Applicatn	(3) _____	_____	CTP 160 Security+ Certification	(3) _____	_____
CTP 105 Linux+ Certif Prep	(3) _____	_____	CTP 200 CCNA Cert Prep III	(3) _____	_____
CTP 110 CCNA Cert Prep I	(3) _____	_____	CTP 205 Server +	(3) _____	_____
CTP 150 PC Hardware/Software	(3) _____	_____	CTP 210 Home Tech Integration	(3) _____	_____
CTP 155 CCNA Cert Prep II	(3) _____	_____	CTP 230 Converged Networks	(3) _____	_____
			CTP 235 CCNA Cert Prep IV	(3) _____	_____

Select one of the options below: Networking or Cyber Security

Networking Option (12 hours)

or

Cyber Security Option (18 hours)

CTP 240 Windows Server	(3) _____	_____	CTP 115 Oper System Security	(3) _____	_____
CTP 245 Windows Prof Prep	(3) _____	_____	CTP 165 Incident Response/Hand	(3) _____	_____
CTP 250 Windows Network Infr	(3) _____	_____	CTP 260 Comp System Forensics	(3) _____	_____
CTP 281 Intrnshp/Tech Cmp Supj	(3) _____	_____	CTP 265 Firewalls/Netwrk Secur	(3) _____	_____
			CTP 270 Security Mgmt Practices	(3) _____	_____
			CTP 282 Internshp/Cyber Secur	(3) _____	_____

Total Credit Hours (minimum of 64 required): _____

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

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

Student Signature: _____ **date:** _____

Advisor Signature: _____ **date:** _____