



OTA Last Mile Award Education Plan

Note: Please fill out and "SAVE AS" to Save Your Information

Name: _____

Unmet Need (\$): _____

College: _____

Financial Summary (Tuition, Housing, Outstanding Balances, Medical, etc.):

Credits Needed for Degree: _____ Credits Completed: _____

Expected Graduation Date: _____

Fall - 20_____

Course # and Title	Crdts
Total	

Winter - 20_____

Course # and Title	Crdts
Total	

Spring - 20_____

Course # and Title	Crdts
Total	

Summer - 20_____

Course # and Title	Crdts
Total	

Fall - 20_____

Course # and Title	Crdts
Total	

Winter - 20_____

Course # and Title	Crdts
Total	

Spring - 20_____

Course # and Title	Crdts
Total	

Summer - 20_____

Course # and Title	Crdts
Total	

What are the strategies and plan you have in place to be successful in the remaining credits/courses to complete your degree?