



**CAREER & TECHNICAL EDUCATION -- CERTIFICATE**

**Mammography Technologist**

**PROGRAM WORKSHEET AND GRADUATION REQUIREMENTS**

Student Name: \_\_\_\_\_ Aims #: \_\_\_\_\_ Graduation Evaluator: \_\_\_\_\_  
 Advisor: \_\_\_\_\_ Ext: \_\_\_\_\_ Date: \_\_\_\_\_

<u>Course Number</u>	<u>Requirements</u>	<u>Required Credits</u>	<u>Term Complete</u>	<u>Transfer Credits</u>	<u>Transfer School</u>	<u>Needs</u>
RTE 250	Mammography	3	_____	_____	_____	_____
RTE 291	Mammography Clinical	3	_____	_____	_____	_____
<b>Total Credits for Certificate:</b>		<b>6</b>				