



Name: _____ CWID# _____ Grad Date: _____

Matric. Date: _____ Transfer Credit _____ Advisor: _____

- _____ CMN Application _____ ACT Scores _____ OSU Health Form / Imm: record or wavier
- _____ OSU Application _____ COMPASS: _____ OSU Bursar Form
- _____ Official HS Transcript _____ CMN Scholarship/Tuition Waiver _____ Consent Forms
- _____ Official Higher Ed. Transcript(s) _____ FAFSA _____ Tribal Citizenship Card

Specialization Requirements – 21 Hours				
Semester	✓	Course	Hrs	
		GAM 1103 Introduction to Native American/Oklahoma Gaming	3	
		GAM 2313 Native American Gaming Regulations and Compliance	3	
		GAM 2213 Native American Gaming Law	3	
		GAM 2203 Casino Mathematics	3	
		GAM 2103 Casino Operations Management	3	
		GAM 2113 Electronic Games Management	3	
		GAM 1123 Supervision and Protection of Casino Games I	3	
Electives – 3 Hours (Choose one of the following)				
		GAM 2323 Supervision	3	
		GAM 2143 Basic Room Operations	3	
		GAM 2413 Casino Security	3	
		GAM 1413 Introduction to the Casino Industry	3	
		GAM 2303 Techniques of Casino Dealing	3	

- _____ MATH0143 _____ MATH0153 _____ MATH0163
- _____ ENGL0143 _____ READ0143 _____ PHYS0123

✓ = Exam Equivalency or write semester course taken.

I have access to and understand, I am responsible for knowing the policies and procedures of College of the Muscogee Nation as published in the current CMN Catalog concerning, but not limited to: student rights, registration, fees and billing, grades, degree requirements, graduation requirements, probation, and disciplinary action(s). I have been advised and I understand the courses listed on this Plan of Study are required to complete the CMN Certificate in Mvskoke Language and that I will take courses that progress to the completion of this degree.

Student Signature

Date

I have advised the above named student to read and know the CMN Catalog, this Plan of Study lists the courses required to complete the Certificate in Mvskoke Language, and that he/she must take courses that progress to the completion of this degree.

Advisor Signature

Date

Approved: Academic Dean

Date

