



**AGRICULTURE
MECHANIZED AGRICULTURE
2007-2008**

Name: _____

SSN/ID: _____

Date: _____

Complete the following program of study:

Certificate of Achievement (R.8180.CA) Major requirements (40 units minimum)	units	completed	in progress	planned
MAG 19V – Cooperative Work Experience, Occupational	2			
MAG 20 – Equipment Technician	11			
MAG 21 – Equipment Technician	8			
MAG 30 – Equipment Technician	11			
MAG 31 – Equipment Technician	8			

Faculty Advisors: Mr. David Clark (Reedley) and Mr. Gary Wenter (Reedley)