



Program Data Sheet

Program Title _____
 Award Type _____
 College _____
 Effective Term _____

Incomplete forms will be returned to sender for completion.

General Information	
CIP Code	
TOP Code	
Primary SOC Code	
(optional) Additional SOC Codes <i>Add up to four additional SOC codes</i>	
Career/Technical Education (CTE) Y/N	Yes No
**If CTE, list LAOCRC date	
Program Goal	
Total Program Length (weeks) <i>1 semester = 16 weeks</i>	
Meta Major Category	

Credit Programs Only	
Minimum Total Units	
Maximum Total Units*	
Minimum Major Units	
Maximum Major Units*	
Financial Aid Eligible	Yes No

*If min and max units are the same, skip these two entries

Noncredit Programs Only	
Minimum Hours	
Maximum Hours	

EPIE Use Only	
Board Approval Date	
CCCCO Unique Code	