

**COLLEGE OF THE OUACHITAS
APPLIED SCIENCE
DEGREE PLAN**

**Truck Driver Training
Certificate of Proficiency**

Name _____ SSN _____

Advisor _____

Division Chair Signature _____

Semester	Grade	Course Number	Course Name	Prerequisite(s)
_____	_____	TKDR 1105	Commercial Driving Theory	
_____	_____	TKDR 1102	Truck Driving Lab	