ASSOCIATE OF APPLIED SCIENCE

AUTOMOTIVE SERVICE TECHNOLOGY

Advisor _____

Cip Code: 47.0604; Degree Code: 3471

AY2025-2026

ACTS

Possible Prerequisites Semester Hours Grade

Student Name_____ Student ID _____

ENG	0051	Writing Seminar	NC	
ENG	0053	English Fundamentals	NC	
MATH	0021	Foundations of Math Reasoning	NC	
MATH	0083	Math Fundamentals	NC	

Year 1 - First Semester (16 credit hours)		Semester	Hours	Grade	ACTS	
AST	1105	Automotive Engine Repair		5		
AST	1203	Automotive Brake Systems		3		
AST	1205	Automotive Suspension and Steering		5		
ENG	1203	Workplace Essentials or higher-level English		3		ENGL2023

Year 1 - Second Semester (18 credit hours) Second Semester Second Semester Second Seco		Semester	Hours	Grade	ACTS	
AST	1106	Automotive Electrical/Electronic Systems		6		
AST	1206	Automotive Engine Performance		6		
ENG	1003	Composition I		3		ENGL1013
MATH	1013	Mathematical Applications or higher-level Math		3		MATH1003

Year 1 – Summer Semesters (10 credit hours) Semester			Hours	Grade	ACTS	
AST	1604	Automotive Heating & Air Conditioning		4		
		3 hours from Social Science		3		
		ECON, HIST, GEOG, SOC, POSC, PSY prefixes		5		
		Choose one Directed Elective:				
AST	1003	Hybrid, Electric, and Fuel Cell Vehicle Technologies				
PE	1623	Concepts of Fitness				
SOC	2213	Principles of Sociology		3		SOCI1013
SPCH	1203	Oral Communication				SPCH1003
TECH	1713	Safety				

Year 2 – F	irst Semester	(16 credit hours)	Semester	Hours	Grade	ACTS
AST	2105	Automatic Transmission and Transaxles		5		
AST	2205	Automotive Manual Drive Train & Axles		5		
		Choose one:				
MIS	1033	Introduction to Computers		2		CPSI1003
MIS	1443	Technical Computer Application		3		
MIS	1503	Microcomputer Applications				
		Choose one Directed Elective:				
AST	1003	Hybrid, Electric, and Fuel Cell Vehicle Technologies		- 3		
PE	1623	Concepts of Fitness				
SOC	2213	Principles of Sociology				SOCI1013
SPCH	1203	Oral Communication				SPCH1003
TECH	1713	Safety				

Total Required Credit Hours (60)

Expected Graduation Date:_____

Student Signature: _____

Advisor Signature:

Date:



Date: _____