UB Curriculum: Pathways Worksheet
Name: _________________________ Person #: ________________________

Following will be my Global Pathway:
Global Pathway Topic: _____________________
Course from List 1:
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

Or Relevant Transfer Course with Applicable GER:
Institution: _______________________________________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
Approved SUNY GETA or UB AREA received: _______

Course from List 2:
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

Or Relevant Transfer Course with Applicable GER:
Institution: _______________________________________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
Approved SUNY GETA or UB AREA received: _______

Course from List 3:
Institution (if direct articulation): _____________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

Or Relevant Transfer Course with Applicable GER:
Institution: _______________________________________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
Approved SUNY GETA or UB AREA received: _______

Course from List 3:
Institution (if direct articulation): _____________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

**Please Note: Course 3 must be a UB approved course within this selected Pathway or a direct course articulation**

Following will be my Thematic Pathway:
Thematic Pathway Topic: _____________________
Course from List 1:
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

Or Relevant Transfer Course with Applicable GER:
Institution: _______________________________________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
Approved SUNY GETA or UB AREA received: _______

Course from List 2:
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

Or Relevant Transfer Course with Applicable GER:
Institution: _______________________________________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
Approved SUNY GETA or UB AREA received: _______

Course from List 3:
Institution (if direct articulation): _____________________________
Course Subject: ___________ Number: _________
Course Title: _______________________________________________________
UB Area: (circle all that apply)

**Please Note: Course 3 must be a UB approved course within this selected Pathway or a direct course articulation**