

# ADVISING SHEET

Please complete *both pages* of the Advising Sheet and email it to your advisor. When the courses have been approved your advisor hold will be removed.

Registration for Term \_\_\_\_\_

Student Name \_\_\_\_\_ Faculty Advisor \_\_\_\_\_

Student ID \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Please enter the courses you plan to take during the upcoming semester below. Note that you cannot enroll in a course until prerequisites have been met.

Department	Catalog Number	Credits	Class Number	Course Title

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_