ACADEMIC ADVISEMENT VERIFICATION FORM NOTE: Please use one form per term.											
Name of Advisee						Cor	ntact N	umber			
(Student)											
Student ID		Major Business Administration		Current # of Credits				Cumulative GPA			
Date of Advisement			FALL/SPWSUM/WIN Year SUMMER		Total # Credits Completed				Last Term GPA		
ILIST OF APPROVED COURSES											
	Course C Prefix		Course # Cou		irse Name			Class #	Section		
1.											
2.											
3.											
4.											
5.											
Alternate Courses											
6.											
7.											
8.											
9.											
Signing this form is an authorization to releas Signature of Student				he Academic AdvisementI	HOLD_ The student a		all risks TE	for failing to adhere t	o this agreement.		
Signature of Advisor						DA					
Notes:			,1501			ADV	ADVISOR: Please check the a				
					_	ro lia	o liate box below College of Arts and Sciences				
					-		College of Business				
								College of Education			
								College of Professional Studies			