

Advising Worksheet

Term: Fall ____ Spring ____ Summer ____

Year: _____

Student's Name _____ ID # _____

Classification _____ Assigned Advisor _____

Major: *(Circle One)* ACCT BUSA FINC MISM MKTG MGMT

Are you planning to graduate within the next two semesters? YES NO

Schedule Preference #1

Course I.D. and Number	CRN	Meeting Time	Prerequisites Checked?
1.			
2.			
3.			
4.			
5.			
6.			

Schedule Preference #2

Course I.D. and Number	CRN	Meeting Time	Prerequisites Checked?
1.			
2.			
3.			
4.			
5.			
6.			

Advisor's Comments

Student/Date

Advisor/Date