Logo, company name

Description automatically generated **Semester** (Please Circle): ­­­Fall Spring Summer **Yea**r**:** \_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMIC ADVISING FORM**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student A#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Projected Courses**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General Education Core** | **CRN’S** | **COURSE** | **INSTRUCTOR** | **DAY** | **TIME** | **BLDG** | **ROOM** | **CAMPUS** | **Requires Online**  **(Y or N)** |
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| **Technical Concentration** |  |  |  |  |  |  |  |  |  |
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**Students are required to take at least one academic course per semester**

**Online Course Agreements** (Please Initial)

\_\_\_\_\_\_ I understand I must contact my advisor or the Online Course Administrator for issues regarding access to my online course(s).

\_\_\_\_\_\_ I understand I must use my RSTC email account to access course information and obtain initial access to my online course(s).

\_\_\_\_\_\_ I understand if I have not logged into my online course by the first day of class, I must contact my online course instructor or academic advisor.

\_\_\_\_\_\_I understand it is my responsibility to review my Degree Works to ensure I am taking the courses I need to complete my degree or certificate requirements.

Student Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**A review of the Degree Works has been discussed with the student during advising**.

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

Revised March 29, 2023