# Transfer Student Advising Form

Student Name:

Student ID:

Student e-mail:

Major:

Career Goal:

Community College/OtherGPA:

Are you working? Yes No

How many hours are you working/wk?

Are you working on or off campus?

Study Time: hr/wk:

Current Semester: Yr: Please list below the course you are currently enrolled in and the grade you have earned up to this point, i.e,” A”, “B”,etc...

Next Semester: We will complete this together when you come to visit me for advising

Courses: