Advising Verification Form

Major Advisor Signature or Stamp:



Date:				California Promise	
Advising session to prepare for:	Spring 2019	Sum	mer 2019	Fall 2019	
Name:					
Last		First		Middle	
Check One: 2-year pledge	(ADT Transfer)		4-year pledg	е	
SDSU Red ID:					
Email Address:					
(Area Code) Phone Number:					
Major (with Emphasis if applicable):				
Minor (if applicable):					
Date and Time of Advising Appoint	tment:				
Major Advisor Name (Print):					

Thank you for meeting with your Major Advisor to discuss your academic standing and/or academic plan.