Advising Verification Form



a 1.c .	T .
(alitomina	DWOMMOO
California.	r romuse.

Date:			Carlyottia 1 tomise
Name:			
	Last	First	Middle
Check One:	2-year pledge (ADT Transfer)		4-year pledge
	<i>y</i> 1 <i>y</i> ()		<i>y</i> 1 <i>c</i>
SDSU Red ID:			
Email Address:			
(Area Code) Ph	one Number:		
()			
Major (with Em	nphasis if applicable):		
Widjoi (with En	iphasis ii applicable).		
M: (:C 1:	11.)		
Minor (if applic	cable):		
Date and Time	of Advising Appointment:		
Major Advisor	Name (Print):		
Major Advisor	Signature or Stamp:		
	<u> </u>		

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