Advising Verification Form

Major Advisor Signature or Stamp:



Date:			CALIFORNIA PROMISE
Name:			
	Last	First	Middle
Check One:	2-year pledge (ADT Transfer)		4-year pledge
SDSU Red ID:			
Email Address:			
(Area Code) Pho	one Number:		
Major (with Em	phasis if applicable):		
Minor (if applic	able):		
Date and Time o	of Advising Appointment:		
Major Advisor 1	Name (Print):		

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