



**Faculty Advising Verification Form 2018-2019**



**FRESNO STATE CSU-LSAMP PARTICIPANTS**

(Complete this one-two year plan with your faculty academic advisor, listing when you will take specific requirements to graduate and extracurricular activities)

Please sign the form and have a faculty/department advisor also sign the form. Provide all information requested (For example, Chem 1A; Biol 1A; CE 85 etc). If not planning to be enrolled in SUMMER classes, explain what you will be doing i.e. summer research program, GRE preparation, etc.

Review your DPR (degree Progress Report) which can be found on your student portal (myfresnostate) with your Advisor.

**Academic advising is a requirement of LSAMP – must submit at least once per year.**

Student's Name: \_\_\_\_\_ Major: \_\_\_\_\_ Campus ID: \_\_\_\_\_

Minor (specify if any): \_\_\_\_\_ Career Goal: \_\_\_\_\_ Date: \_\_\_\_\_

SEMESTER/YR: FALL 2019	SEMESTER/YR: SPRING 2020	SUMMER 2020	SEMESTER/YR: FALL 2020	SEMESTER/YR: SPRING 2021	SUMMER 2021
Course Name i.e.Chem 1A/Math 75/etc	Course Name i.e.Chem 1A/Math 75/etc		Course Name i.e. i.e.Chem 1A/Math 75/etc	Course Name i.e. i.e.Chem 1A/Math 75/etc	
<b>Total Units</b>	<b>Total Units</b>		<b>Total Units</b>	<b>Total Units</b>	

Student Signature: \_\_\_\_\_ Faculty Advisor Name (Print): \_\_\_\_\_

Proposed Graduation Semester & Year: \_\_\_\_\_ Faculty Advisor's Signature: \_\_\_\_\_