

Faculty Advising Verification Form 2011-2012

FRESNO STATE CSU-LSAMP PARTICIPANTS

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

SUBMIT ONCE PER SEMESTER

Please sign the form and have a faculty academic advisor also sign the form. Provide all information requested. Indicate the total units that you will take each semester. Under the Course # column use the proper department abbreviations (see the Schedule of Classes) followed by the course number (For example, Chem 1A; Biol 1A; CE 85 etc). Under the Units column, specify the number of units that the course is worth. **Academic advising is a requirement of LSAMP.** *If not planning to enrolled in SUMMER 2012 classes, explain what you will be doing i.e. summer research internship, GRE preparation, etc.

Student's Name: _____

Major: _____ Campus ID: _____

Minor (specify if any): _____

Career Goal: _____ Date: _____

SEMESTER/YR: FALL 2011		SEMESTER/YR: SPRING 2012		SEMESTER/YR: SUMMER 2012*	
Course #	Units	Course #	Units	Course #	Units
Total Units		Total Units		Total Units	

Your Name (Print): _____

Faculty Advisor Name (Print): _____

Your Signature: _____

Faculty Advisor's Signature: _____

Proposed Graduation Semester & Year: _____

Current CUM GPA (available on "my Fresno State") _____

CSU-LSAMP is supported by the National Science Foundation under Grant # HRD-0802628-515291, the CSU Office of the Chancellor and Fresno State Academic Resources