

STUDENT ADVISING CARD

Student Name:	ID# Semester:
Courses To Be Taken:	□ Career Advising
	Discussed the following: □ Resume: □ Has one □ Up-to-date □ Internships: □ Done □ Planned □ Considering □ Applied
	Where: When: Graduate School: DBS/MS DMS DPhD
□ Advising Hold Lifted	□ Potential Career Areas: □ Other:
Student: I agree to enroll in the courses listed a	above for the indicated semester.
Student Signature:	Date:
Faculty Advisor: I have reviewed this student's	s courses and discussed the topics checked above.
Advisor Signature:	Date: