# Advisement Form

Name_____ Major Code _____ Date _____

C# _____ E-mail _____

Local address _____ Phone _____

Time Ticket _____ PIN_____

## Course options

| Course Prefix | Course Number | Reason for course (fulfill major, GE, etc.) | Credit(s) | Notes or alternatives |
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| | | Total recommended credits | | |

## Notes_____

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I understand that the above listed courses, or types of courses, were recommended by my advisor for the upcoming semester. It is my responsibility to select and register for courses that match my interest and fulfill degree requirements.

Student Signature_____

Advisor Signature_____

SUNY Cortland
Advisement and Transition
Memorial Library, Room A-111 * 8 a.m. - 4:30 p.m.
607-753-4726 * cortland.edu/advisement