

**ELECTRICAL AND COMPUTER ENGINEERING
GRADUATE ADVISING FORM**

Name: _____

Student Number: J00 _____

Advisor: _____

Phone: _____

E-Mail: _____@jagmail.southalabama.edu

Completed forms are to be submitted to the advisor during advising appointments. The signed form must be returned to the ECE office for registration clearance procedures.

CURRENT COURSES: FALL / SPRING / SUMMER 20 _____

CRN	Course #	Course Title	Credit Hrs	Anticipated Grade

PROPOSED COURSES: FALL / SPRING / SUMMER 20 _____

CRN	Course #	Course Title	Credit Hours

PROJECTED COURSES: FALL / SPRING / SUMMER 20 _____

CRN	Course #	Course Title	Credit Hours

Hours of employment _____

Total Credit Hours _____

Note to Student: Either EE 540 or EE 543 can be used to satisfy degree requirements. Prerequisite violations will result in administrative withdrawal from the course(s) in question, at student's expense, and possible delay in graduation.

I HAVE READ AND UNDERSTOOD THE DEPARTMENT'S POLICY CONCERNING VIOLATION OF PREREQUISITES AND MANDATORY ADVISING PRIOR TO EACH SEMESTER ENROLLED. I ALSO UNDERSTAND COURSE AVAILABILITY IS CONTINGENT UPON ADEQUATE ENROLLMENT. I UNDERSTAND I HAVE TO TAKE THE CLASSES I HAVE BEEN ADVISED FOR.
Approval subject to review and verification.

Student's Signature

Date

Advisor's Signature

Date

Comments (by student or advisor):

