



Advising Form

_____ **P** _____
Semester **ID#** **Major(s)**

_____ **Last Name** _____ **First Name** _____ **Advisor**

Music Courses

CRN	SUBJ				CRSE #	SEC	Name	Credits	Instructor
	M	U	C	S			Studio:		

Non-Music Courses

CRN	SUBJ				CRSE #	SEC	Name	Credits	Instructor

Student's Signature/Confirmation

Date

Advisor's Signature/Confirmation

Date