



Department of Sociology

Franklin College of Arts and Sciences

UNIVERSITY OF GEORGIA

Graduate Student Advising

Name: _____ **Student ID:** _____

Term: _____ **Year:** _____

I have been advised to enroll in the following courses:

	Course	CRN	Instructor	Credit Hours
1.				
2.				
3.				
4.				
5.				
6.				

Comments:

Student Signature

Major Professor Signature

Please have form signed by your Major Professor before giving it to the Graduate Coordinator Assistant

Cleared for registration _____ by _____, approved by _____.
Date Staff Member Graduate Coordinator