

# Carson-Newman University

## Advising Agreement Form

Student Name \_\_\_\_\_ ID # \_\_\_\_\_

Advisor Name \_\_\_\_\_

Recommended Course selection for \_\_\_\_ Year \_\_\_\_ FALL \_\_\_\_ Spring \_\_\_\_ Summer

Course Prefix	Course #	Course Title
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Alternative Courses:

_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Hours Credit \_\_\_\_\_

Comments/notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date \_\_\_\_\_

The student signature on this form represents the discussion between advisor and student. The student is ultimately responsible to enroll in classes that fulfill graduation requirements. Should the student elect to enroll in any classes other than those on this form, the student should discuss any changes with the advisor before registration. *Students receiving financial assistance from the federal government or the state of Tennessee should be aware that only classes that lead to the degree as outlined in the university catalog and the program evaluation are eligible for Title IV aid.*