



## Advisor Checklist

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

Division: \_\_\_\_\_

Priority Registration Dates: \_\_\_\_\_

Total Number of Assigned Advisees: \_\_\_\_\_

Name of Assigned Advisees: (List All)	Student Scheduled & Attended Appointment (YES or NO)	If Yes, Date Student Attended Appointment	Student Was Not Advised	If Not Advised, Date Student Was Contacted	Notes: <i>(Please indicate if student is graduating in current term or is no longer enrolled.)</i>
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					

Name of Assigned Advisees:	Student Scheduled & Attended Appointment (YES or NO)	If Yes, Date Student Attended Appointment	Student Was Not Advised	If Not Advised, Date Student Was Contacted	Notes: <i>(Please indicate if student is graduating in current term or is no longer enrolled.)</i>
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					
21.					
22.					
23.					
24.					
25.					
26.					
27.					
28.					

Name of Assigned Advisees:	Student Scheduled & Attended Appointment (YES or NO)	If Yes, Date Student Attended Appointment	Student Was Not Advised	If Not Advised, Date Student Was Contacted	Notes: <i>(Please indicate if student is graduating in current term or is no longer enrolled.)</i>
29.					
30.					

**Advisor Signature:** \_\_\_\_\_

**Division Chair Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_