

QUARTERLY ADVISING CHECK SLIP

PERM: _____ Fall Winter Spring 20____

NAME: _____ YEAR (chronologically, not units): _____

CCS MAJOR 1: _____ CCS MAJOR 2: _____

It is a CCS requirement that each student meet with their Faculty Adviser at least one per quarter to have their course plan for the following quarter approved. Quarterly Advising Check Slips are due after pass one of registration ends and before pass two begins. If you do not turn in an Advising Check Slip, your registration will be blocked and will remain blocked until you complete and return this slip.

COURSE PLAN

_____	_____
_____	_____
_____	_____
_____	_____

FACULTY ADVISER SIGNATURE

CCS MAJOR 1: _____ CCS MAJOR 2: _____

BIOLOGY, CHEM, PHYSICS STUDENTS

Are you in a lab/engaged in research?
(circle one)

YES: _____

I'm in between labs

Not yet

Quarters spent in lab: _____

Are you an active participant in
lab/research?

YES NO

What are you doing?

Have you presented? When?

PLEASE ANSWER ALL THAT APPLY TO YOU

Have you submitted an abstract or poster?
Given a talk?

ABSTRACT POSTER TALK

OTHER: _____

WHERE: _____

Have you submitted a manuscript?

YES, _____ TIMES YES, ONCE

NOT YET

WHERE: _____

Have you been published?

NOT YET

YES, in these journals: _____

Have you applied for any grants?

NOT YET YES:

Have you received any grants?

NOT YET YES:

Have you applied for any research
internships?

NOT YET YES:

Have you received any research
internships?

NOT YET YES:

Other notes/accomplishments:
