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Academic Advisor 3OHVDH LQGLFDWHLQRUYPHDULRQBHUWJYHJWHIYlth form
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Verify Statment 7KH UHPDLQZUNXRUVUHG IRU WKH VWXGHQW(V)HGXF D
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- 4. I anticipate this student will complete all requirements for the current program of study
by _____ month a11 < day___(plase a11 <chek aleaso a11 <ns whipply):___Delays a11

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ForDSQUse Only

Updated: 12/8/21

Academic Probation? Yes _____ No _____	Fulltime? Yes _____ No _____
Financially OK? yes _____ No _____	Required course work? Yes _____ No _____
Decision: _____	Colleague Record Changed: _____
Date: _____	Initials: _____