

## CSUSB Music “Group” Advising Form

Student Name \_\_\_\_\_

Student number \_\_\_\_\_

CSUSB email address \_\_\_\_\_

Quarter/year of advising \_\_\_\_\_

**Directions**

1. **Completely fill out every field** above and below. Incomplete or unclear information will result in the form’s rejection.
2. Except for signatures and dates at the end of the document, all information should be completed in **typewritten** form. Handwritten forms may be rejected if not legible. Electronic copies of the form, for completion in a word processing program, are available via email from [tajohnso@csusb.edu](mailto:tajohnso@csusb.edu) or online on the Music Department’s website ([music.csusb.edu](http://music.csusb.edu)).
3. All communication regarding advising must occur in person or through email, and **CSUSB email addresses are the only acceptable addresses** for such communication.
4. By signing and dating this form, you acknowledge that you have 1) provided complete and accurate information, 2) based your list of proposed classes on an official Music Department degree roadmap, 3) attended an official Music Department advising session for the quarter in question, and 4) will enroll for all of the classes listed below. Failure to meet any of those requirements may result in delays in graduation that are not the responsibility of the Music Department.

**Special circumstances** (check all that apply to you):

New to CSUSB     
  On music scholarship     
  Part-time for quarter     
  On academic probation

**Proposed classes** (each row must be completely filled out!)

Course dept & number	Course name	Section	Units

**Notes or questions**

**Signatures**

Student \_\_\_\_\_

Advisor \_\_\_\_\_

Date \_\_\_\_\_