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An important step in your academic success is connecting with faculty in your major department and preprofessional faculty advisors, if applicable, to review your academic plan and discuss career goals, research opportunities, graduate school plans, etc. Use this form as a tool for a yearly conversation with faculty in your department/major. Complete this form, at least once per year, by following the steps below:

1. Refer to your academic plan developed in partnership with the Advising Center in your College i.e. ARC, ACDC, etc. If you do not have an academic plan, please contact your Advising Center to set up a meeting with a Counselor.
2. Based on your academic plan and graduate school/professional school prerequisites, complete the four-semester form.
3. After you fill out your plan, reach out to your Faculty Advisor via email or during their virtual office hours to review your academic plan and career goals. If you do not know who your Faculty Advisor is or know how to contact your Faculty Advisor, please contact the LSAMP/HCOP office or your Advising Center.
  - a. Provide all information requested (For example, Chem 1A; Biol 1A; CE 85 etc). If you are not planning to be enrolled in SUMMER classes, explain what you will be doing i.e. summer research program, GRE preparation, etc.
4. Share your plan with your Faculty Advisor during your advising session either via Zoom share screen or email. Once you have completed your advising session:
  - a. Electronically sign or type in your name in the signature section.
  - b. Email your completed Form (**PDF format ONLY**) to your Faculty Advisor **AND copy (cc)** our office in your email by including the following email address: **fresnolsamp@csufresno.edu**.
  - c. Your Faculty Advisor can **'reply all'** to the email with a brief 'Approved' response and include the HCOP/LSAMP office email (fresnolsamp@csufresno.edu).

**Student's Name:** \_\_\_\_\_ **Major:** \_\_\_\_\_ **Campus ID:** \_\_\_\_\_

**Minor (specify if any):** \_\_\_\_\_ **Career Goal:** \_\_\_\_\_ **Date:** \_\_\_\_\_

SEMESTER/YR: FALL 2020	SEMESTER/YR: SPRING 2021	SUMMER 2021	SEMESTER/YR: FALL 2021	SEMESTER/YR: SPRING 2022	SUMMER 2022
Course Name i.e.Chem 1A/Math 75/etc	Course Name i.e.Chem 1A/Math 75/etc		Course Name i.e. i.e.Chem 1A/Math 75/etc	Course Name i.e. i.e.Chem 1A/Math 75/etc	
<b>Total Units</b>	<b>Total Units</b>		<b>Total Units</b>	<b>Total Units</b>	

**Student Signature:** \_\_\_\_\_ **Faculty Advisor Name (Print):** \_\_\_\_\_

**Proposed Graduation Semester & Year:** \_\_\_\_\_ **Faculty Advisor's Signature:** 'Reply All' to student's email to approve plan

Please indicate which program you are currently participating in:  HCOP  LSAMP  Both HCOP & LSAMP Participant