**CALS Advising Checklist for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- |
| Date of Encounter: | | Semester: | | Advisor: |
| ☐ ARR check | | ☐ GE check | | ☐ WEPT check |
| ☐ Unit check: \_\_\_\_\_ units (if more than 90 units by end of semester complete boxes below) | | | | |
|  | ☐ Capstone paperwork | | ☐ Graduation application | |
| Proposed Schedule: | | | | |
| Notes: | | | | |

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| Notes: | | | | |