

Faculty Advising Verification Form

Bring this form to your faculty advisor meeting and update as needed. Download or print.

An important step in your academic success is connecting with faculty in your major, department and/or pre-professional faculty advisor 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 your faculty advisor.

STUDENT INFORMATION

Student Name: _____	Major: _____	Campus ID: _____
Minor (if applicable): _____	Career Goal: _____	Date: _____
Please indicate which CASA program(s) you are currently participating in: ____ HCOP ____ HPP ____ LSAMP ____ RISE		

REASON(S) FOR THIS ADVISING SESSION

<input type="checkbox"/> Application to Health Professional Program/ Graduate School (i.e.: timeline. letters of recommendation, admission tests, etc.) <input type="checkbox"/> Career Exploration <input type="checkbox"/> Core Competencies	<input type="checkbox"/> Course(s) and Pre-requisites* (see college advising center first) <input type="checkbox"/> First Advising Session (select additional box) <input type="checkbox"/> Professional Development <input type="checkbox"/> Research Opportunities <input type="checkbox"/> Other: _____
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EXPERIENCE/ CORE COMPETENCIES

List most recent experience(s) related to your pre-health profession or graduate program (employment, internships, research, volunteering, etc.) and the competencies they fall into. Review competencies that pertain to your health professional area or grad school (if applicable). An example is the Allopathic Medicine AAMC Core Competencies, according to the AAMC, "Successful school applicants are able to demonstrate skills, knowledge, and abilities in these areas, one experience can illustrate proficiency across multiple competencies", visit the AAMC website for a full list of [Core Competencies](#).

DATES	ACTIVITY	SITE/LOCATION	HOURS	TYPE	COMPETENCIES
1/2019 - 4/2023	Scribe, Shadowing, Case Management, etc.	Name site and city (i.e. Valley Children's Hospital - Madera, CA)	#	Employment, paid/nonpaid Internship or Research lab, etc.	See List of Core Competencies

Don't have any activities? This is the perfect opportunity to talk to your faculty advisor for recommendations, research opportunities, networking graduate schools, internship opportunities, and more.

QUESTIONS/ NOTES/COMMENTS/NEXT STEPS:

Use back or additional sheet for more note space

Student Signature: _____ Proposed Graduation Semester and Year: _____

ADVISORS USE ONLY	Date: _____
Faculty Advisor Signature: _____	Faculty Advisor Name (print) _____