



Registrar's Office

800 Georgia Southwestern State University Drive
 Americus, GA 31709-4379
 (229) 928-1331

ADVISOR GRADUATION CHECKSHEET

Name: _____ gswID#: _____

Major: _____ F qvdrq'O clqt: _____

Minor: _____ Semester Graduating: _____

I approve this student for graduation in the degree program stated above contingent upon the satisfactory completion of the courses listed below (if no additional courses are required, none are listed).

COURSE	TITLE	SEMESTER/ YEAR	MINIMUM GRADE NEEDED

The requirements checked need to be met:
 US History GA History US Constitution GA Constitution

Comments:

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*** All course substitution forms must be submitted to the Vice President of Academic Affairs for approval.
 * All minor forms should be submitted along with the major curriculum sheet and signed by the appropriate department chairperson and advisor.**

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Signature of Student	Date	Signature of School Dean or Dept. Chair
Signature of Advisor	Date	Signature of Dean, School of Education Division (if applicable)