NEW STUDENT ACADEMIC ADVISING INFORMATION

Please complete and bring this form with you to your first Academic Advising session

Appointment Date: ____________________________

My name: ____________________________________

SFU ID: _____________________________________

Time: ____________________________

Advisor name: _____________________________

SFU Email: _______________________________

ACADEMIC HISTORY

Prior to SFU, I have attended post-secondary

☐ Yes  Name of the institution(s): ____________________________

☐ No

I HAVE COMPLETED:

☐ Foundations of Academic Literacy — FAL
  • High school: completion of English 12 or English 12 Literature with 75% or better, including provincial exam.
  • Post-secondary: completion of a college English course that transfers to SFU as English (ENGL) credit, regardless of being Writing (W) designated or not. Minimum grade of a C- required, OR any college course that transfers to SFU as a certified W course. Minimum grade of a C- required.

☐ Foundations of Academic Numeracy — FAN
  • High school: completion of MATH 11 or MATH 12 with 70% or better.
  • Post-secondary: completion of a college course that transfers to SFU as a certified Quantitative (Q) course. Minimum grade of a C- required.

ACADEMIC PLANS

Programs (majors or minors) I am interested in:

Subjects I enjoy or excel in:

Involvement opportunities I would like to explore (Co-op, joining a club, volunteering, etc.)

Careers I might be interested in:

TOPICS TO DISCUSS WITH MY ADVISOR

Check all that apply:

☐ Course planning
☐ How to declare a major/minor
☐ Understanding transfer credit
☐ Improving academic performance
☐ Getting involved on campus
☐ Creating a balanced schedule
☐ How do I select a major

☐ Exploring program options
☐ FAL/FAN requirements
☐ WQB requirements
☐ SFU resources and supports
☐ Academic Probation
☐ Required to Withdraw
☐ What can I do with my degree

ACTION PLAN

(to be completed with your advisor in your appointment)

☐ ___________________________________________

☐ ___________________________________________