B Registration Advising Form

Campus: Jackson - ATC Campus: Jackson - ATC

Semester: Fall Year: 2008

**Student Name**: Fake, Ms. Terry M. **Hinds ID#:** 6666666

**Payment Due Dates**

1st- 4 week Summer Semester or Full 8-week Summer Semester:

**May 23, 2008**

2nd- 4 week Summer Semester:

**June 20, 2008**

Fall Semester 2008:

**August 8, 2008**

Spring Semester 2009:

**January 2, 2009**

**\*\*\*Late fees will be assessed after the due date\*\*\***

Are you a currently-enrolled student? Yes

**Admissions:**

Admit Code: **A-CT**

Testing Required: No

Admissions Clerk: Fake Fake

**Financial Aid/Business:**

Financial Aid Status: Probation

Previous Balance Due: $0.00

Restrictions: Not Applicable.

Registration Receipt Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Placement Levels:**

**English:** Choose an item.

**Math:** Choose an item.

**Reading:** Choose an item.

**LLS:** Choose an item.

**Compass Total:** Click here to enter text.

**ACT Total:** Click here to enter text.

Scholastic Standing: Probation

Program of Study(Major): AAS-MBCT

**Courses Advised to Take:**

Other Comments: Click here to enter text.

Advisor: Click here to enter text. Date: 8/12/2008

Advisor

Signature:

Student

Signature:

To save form in the “R” drive: last name first name ID# semester Example: heindl michael 1043985 su08