UNDERGRADUATE ACADEMIC ADVISOR APPROVAL
This form is to be used when an Undergraduate student returns to Mason after suspension.

Last Name ___________________________ First Name ___________________________ G Number ___________________________

Student’s Mason Email ___________________________ Phone Number ___________________________ Major ___________________________

Semester Suspended: ___________________________ Semester Returning to Mason: ___________________________

Was this a 1st or 2nd Suspension? ___________________________

Course Selection for Semester of Return: Alternate Courses:
___________________________________ ___________________________
___________________________________ ___________________________
___________________________________ ___________________________
___________________________________ ___________________________
___________________________________ ___________________________

Note: Students are automatically limited to 13 credits upon return from suspension.

I understand that taking courses other than those listed above could risk further academic action.

_________________________________________ Date

Student’s Signature (Required)

The student listed above has been advised and the Academic Advising hold should be lifted from his/her account.

_________________________________________ Print Name Date

Advisor’s Signature (Required)

This form should be submitted to the student’s school/college undergraduate academic affairs/student services office.

Office Use Only

☐ Academic Advising Hold Removed
By ___________________________
Date Removed ___________________________