ACADEMIC PROGRAM INFORMATION FORM 2024-2025

# **GRADUATE PROGRAMS**



| Student Last Name   | First Name        | Student ID/SSN |
|---------------------|-------------------|----------------|
| Advisor Information |                   |                |
| Add Advisor         | and/or Mentor     |                |
| Remove Advisor      | and/or Mentor     |                |
| Add a 2nd Advisor   | Add a 3rd Advisor |                |

#### **Nursing & Health Sciences:**

| 9360 | Pre-Nursing Management & Leadership  |        |
|------|--------------------------------------|--------|
| 655  | Nursing Leadership in Healthcare MSN | Nursin |

## Physical, Life, Movement & Sport Sciences:

9370 Pre-Sport Coaching

### **Business & Computer Science**

261 CyberAccounting

| Division Use Only          |   |  |  |
|----------------------------|---|--|--|
| Nursing & Health Sciences: |   |  |  |
| 9760                       | Nursing Management & Leadership                               |  |  |
| Physical, L                | <b>.ife, Movement &amp; Sport Sciences:</b><br>Sport Coaching |  |  |

#### \*Students will remain in the 99.ACAD.PB program, allowing them to enroll in Undergraduate courses.

| Student's Signature:        | Date:                           |
|-----------------------------|---------------------------------|
| Advisor's Signature:        | Advisor's PRINTED Name:         |
| 2nd Advisor's Signature:    | 2nd Advisor's PRINTED Name:     |
| Division Chair's Signature: | 2nd Division Chair's Signature: |
| 500 8th Avenue RCH 108      | www.less.odu/rogistrar          |