School of Computing (SoC)

University of Georgia

DOUBLE DAWGS ADVISEMENT FORM

** This form is to be used by the undergraduate BS.CSCI student who has been accepted to the UGA Double Dawgs program.

Steps to follow: 1) Approved by Undergraduate Academic Advisor 2) Submitted for course LEVEL override to Samantha Varghese, slvargh@uga.edu. Thank you.

Full Name _____ UGAID# _____

Degree/Major: _____ UGA Email: _____

Acceptance to Double Dawgs Term: Fall   Spring   Summer   20_____

Advising Term: _____ _____   Accepted to Pathway: MS CSCI NT   MS CYB NT

Course Prefix	No.of Course	CRN	Credit Hours	Comments

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_____   _____

Student Signature/Date   Undergraduate Academic Advisor Signature/Date

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                                               Undergraduate Academic Advisor Printed Name