**NUMBER OF MEETINGS:**

|  |  |  |
| --- | --- | --- |
|  | **APPOINTMENT** | **NO APPOINTMENT** |
| **METHOD OF MEETING** |  |  |

|  |
| --- |
| **Discussion Subject:** |
| **Academic Advisor's Note:** |
| **Student's Note:** |
| **Conclusion and Suggestions:**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| **Was Referred to the Psychological Counseling and Guidance Unit?** |  |  |

 |

**Student Name Surname Signature Academic Advisor Name Surname Signature**