



Program of Higher Education and Student Affairs Leadership

M.A. Advising Checklist

Name _____ Bear Number _____

Address _____

Email _____ Phone _____

Program Requirements	Date Completed
Admission Date	
Advisor Selected	
Residency Requirement (see graduate catalog)	
Program of Study on file with Graduate School	
Successful Completion of Internship or Field Experience	
Permission to Take Comprehensive Exam (use form on HESAL website)	
Written Comprehensive Exam Passed	
Application for Graduation Submitted	

Advisor Signature _____ Date _____