

Please print or fill in:

SD Mesa CSID: _____

Last Name: _____ First Name: _____ Suffix/ MI: _____

Contact Phone: _____ Email: _____

Semester: Fall Spring Major/Career of interest: _____

Select the program you are receiving services from:

____ EOPS ____ DSP&S ____ Financial Aid ____ STAR Trio ____ Other: _____
Please specify program

PLEASE INITIAL:

- ____ I have both Math and English Assessments on file and I am fully matriculated (**Matriculated** = Completion of Orientation to Mesa, Math and English assessments, and Abbreviated or Comprehensive Educational Plan).
- ____ I will attend and participate in our summer kick-off, "Peer Partnering Night."
- ____ I will be enrolled in 12 units for both the Fall and Spring semester and maintain a min. 2.0 GPA.
- ____ I will pay registration fees by deadlines provided to me.
- ____ I will attend and participate in ADVOC8 group gatherings and information sessions.
- ____ I will complete and submit tracking forms for both Fall and Spring semesters.

Tracking forms will include dates of attendance for the following: ADVOC8 program gatherings, progress reports, tutoring services, career or transfer days, workshops, internship hours, and campus involvement opportunities.

In the space provided, please let us know what you hope to gain through the ADVOC8 Program in your Second Year at Mesa College.

By submitting my application to the ADVOC8 Program at San Diego Mesa College, I acknowledge and understand that the program requirements listed above need to be met and maintained in order to continue enrollment and benefit from the program. I acknowledge my willingness to become a participant in the program and work closely with the Counseling Office to ensure my academic achievement.

Student Signature: _____ Date: _____

SAN DIEGO MESA COLLEGE
Counseling Office
(619)-388-2672