

NORTH CAROLINA AGRICULTURAL AND TECHNICAL STATE UNIVERSITY
SCHOOL OF EDUCATION
STUDENT SERVICES



REQUEST FOR ASSISTANCE

NAME: _____

BANNER ID#: _____ EMAIL Address: _____

PHONE NUMBER: _____ MAJOR FIELD OF STUDY: _____

CURRENT CLASSIFICATION: _____

REASONS FOR VISIT

Situation/reason for academic counseling (Describe briefly)

Please check all that apply:

- GPA Concerns
- Scheduling Issues
- Mentoring/Counseling
- Advising for Registration
- Praxis I
- Prospective Major Change

Student Signature: _____ Date: _____