

# University of Tennessee, Knoxville

## MPA/MPP/MPPA ADVISEMENT FORM

Before registering for graduate courses, students must complete this form. Please refer to the general advising email for selecting your courses. Please also complete the second page of the form. Send your completed form to Graduate Coordinator Ms. Zoe Carihfield at [zcarihfie@vols.utk.edu](mailto:zcarihfie@vols.utk.edu). If you have concerns, please email her or schedule an appointment.

Student's Name \_\_\_\_\_ Student ID \_\_\_\_\_

Term and Year \_\_\_\_\_ Program (MPA, MPP, MPPA, MPA Online) \_\_\_\_\_

COURSE CODE	COURSE TITLE	CREDITS	PROF.

STUDENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DIRECTOR'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Please use the space below to include all courses you have taken so far to be counted towards your degree.

Anticipated graduation date: \_\_\_\_\_ Certificate/Concentration: \_\_\_\_\_

COURSE CODE	COURSE TITLE	SEMESTER TAKEN	PROF

TOTAL NUMBER OF COURSE CREDIT HOURS COMPLETED: \_\_\_\_\_