

**HARDING UNIVERSITY**  
Academic Advising: Statement of Understanding

\_\_\_\_\_  
Student Name (Printed)

\_\_\_\_\_  
SSN

\_\_\_\_\_  
Major

\_\_\_\_\_  
Minor

I have been advised to enroll in the course(s) listed below in order to progress toward the completion of my degree. I agree that I will enroll in the suggested courses below and submit a copy of my registered classes to my academic advisor. I further agree that I will not drop, add or change courses in my schedule without FIRST consulting with my academic advisor. ANY ALTERATIONS to this schedule will be submitted to my advisor with justifications in writing and placed in my advising file.

Additionally, I understand that it is my responsibility to thoroughly check all graduation requirements for my degree stated in the Harding University General Catalog and to plan to meet those requirements to ensure a timely graduation.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

I attest to the fact that I have reviewed the schedule below concerning requirements for this student's major.

\_\_\_\_\_  
Academic Advisor Signature

\_\_\_\_\_  
Date

Required Classes for \_\_\_\_\_ Semester

Course Dept/ Number	Course Title	Credit Hours

Choose remaining hours from the list below

Course Dept/ Number	Course Title	Credit Hours