

# BS Geographic Information Science

Texas A&M University-Corpus Christi

## Registration Release Form

\_\_\_\_\_ Banner Student ID # \_\_\_\_\_ Student Name

Registration Term: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Year

Student GPA: \_\_\_\_\_

Intended Semester of Graduation: \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_ Year

I have reviewed my degree plan in Degree Planner: \_\_\_\_\_ Yes \_\_\_\_\_ No

Advisor/Mentor Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have been advised and/or have been informed of the degree courses, catalog, and career opportunities.

\_\_\_\_\_ I am satisfied with my degree plan

\_\_\_\_\_ My faculty mentor and I have agreed on changes to my degree plan which are noted herein. Formal and complete documentation of these changes is my responsibility to obtain.

I have met with my academic advisor/mentor concerning my education and registration. I understand that it is my professional responsibility to actively learn and participate in the Geographic Information Science Program and my education. I also understand that I am ultimately responsible to make sure that I am taking courses in the correct order per my degree plan.

\_\_\_\_\_ Student \_\_\_\_\_ Date \_\_\_\_\_ Advisor/Mentor \_\_\_\_\_ Date

*\*\*\*Submit signed form to CBI 110 to release hold\*\*\**

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(for Office Use only)

\_\_\_\_\_  
Processor (Print)

\_\_\_\_\_  
(Sign)

\_\_\_\_\_  
Date