

ADVISOR AGREEMENT FORM

The purpose of this form is to initiate a conversation between student and advisor about expectations of the student-advisor relationship. Please complete the form and return it to the Department's undergraduate services officer.

Student Information:

Name: _____ Email: _____

Date of declaration: _____ Expected graduation date: _____

ID: _____ Phone: _____

Major course-plan completed: _____

Advisor Information:

Name: _____ Email: _____

Student-Advisor Expectations: The following are to be negotiated between the advisor and the student. Please check all expectations that the advisor is willing to commit to, and add or disregard items as appropriate:

___ Have regular meetings with the student. (circle one) Weekly Monthly Quarterly

___ Empower the student to grow academically, personally, and professionally.

___ Serve as a liaison to other departments and programs on behalf of the student.

___ Attend the student's performances and otherwise engage with the student's research and/or creative activity.

___ Provide academic, personal, and professional support for student-initiated endeavors (ie recitals, studies abroad, changes to course-plan, graduate school, post-collegiate employment, etc.).

___ Inform the student of relevant opportunities within Stanford and beyond, such as grants, internships, study-abroad opportunities, etc.

Other agreements:

Student signature: _____ Date: _____

Advisor signature: _____ Date: _____