



Department of Bioengineering

Quarterly Advising Form

Name _____ SID _____
E-Mail _____ Phone # _____
Faculty Advisor _____ Date _____
Grad Advisor _____ Date _____

**Please have your courses approved by Dr. Park prior to submitting the form to the department.
hylepark@engr.ucr.edu**

CRN	Subject	Course Number	Section	Title	Units	Instructor	For Office Use Only

Please submit completed form to Annette Meneses, 205 MSE Bldg.

Should you have questions, contact Annette Meneses at ameneses@engr.ucr.edu