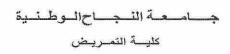
# An-Najah National University Faculty Of Nursing





# Academic Advisory Form - Faculty of Nursing

### Student Information

Full Name:

Student ID:

Major:

Year of Study:

Email:

Phone Number:

Academic Advisor's Name:

## **Session Objectives**

- Review the student's academic progress.
- Discuss academic or clinical challenges.
- Plan the academic pathway for the upcoming semester.
- Identify clinical or training needs.

## **Proposed Courses for the Upcoming Semester**

Course Code	Course Title	Credit Hours	Notes
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### Advisor's Notes

- Student's performance in clinical courses.
- Strengths and areas for improvement.
- Recommendations for academic improvement.

## **Signatures**

Student's Signature: Advisor's Signature: Date of Signature:

Issue Date: June 05, 2025

