Ministry of Higher Education Nile Higher Institution of Engineering and

Technology



Personal Data Student name: Academic number: Department: Semester: Academic year: Number of hours registered: Number of hours registered: Number of hours remaining Number of warnings: (if any) Semester GPA () Cumulative GPA () Previous academic dismissal: (if any) Other information: Topic of academic guidance meeting between the academic advisor and the student) Ocurse's registration)) Course's registration)) Course's registration)) Processes of deletions and additions)) Apologize for the Course)) Apologize for the Course	Tem	plate (1)			
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Academic advisor recommendations: Name of the academic advisor: Signature:) Family problems				
Name of the academic advisor: Signature:) Other problems				
	Academic advisor recommendations:				
Day and Date:	Name of the academic advisor:	Signature:			
		Day and Date:			

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Temp	plate (2)				
(Academic Guidanc	e for Individual cases}				
A copy of this template must be delivered to the superv	visor of academic guidance unit prior to the final exams of				
each s	semester				
Name of the academic advisor:	College:Department:				
Academic year:Semest	ter:				
Number of students in the group:					
Student name:	Academic number:				
Student specialization:	Semester GPA ()Cumulative GPA ()				
Study Level:	The date of guidance meeting:				
The title of guidance meeting:					
The results of guidance meeting					
Student signature:					

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Template (3)							
(Academic Guidance for Collective Cases}							
The Col	lective guidance meetings that	have been carried out throug	h the semester:				
For acad	demic year: 20…/20…						
<u>А сору</u>	r of this template must be deli	vered to the supervisor of ac each semester		to the final exams of			
Name of	f the academic advisor:	College:	Departm	ient:			
Academ	ic year:	Semester:					
Number	of students in the group:						
Number	of collective guidance meeting	s that have been carried out	during the semester:				
Day and	I Date:						
Nu.	Student academic number	Student name	The title of collective guidance meeting	The results of collective guidance meeting			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12				I			
13							

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Template (4)							
(Study Delay Evaluation Form)							
Student academic number	Student name:	Study Level:	College/ specialization: /	Semester GPA	Cumulative GPA		
Causes of study delay	1. 2. 3. 4. S. 6. 7. 8.						
procedures to get rid of this delay	1. 2. 3. 4. 5. 6. 7. 8. 9.						
Follow-up the student in the next semester: 20							
Semester GPA: Cumulative GPA:							