

How to Lift an Advisor Hold

For College of Education and
Community Innovation (CECI) Students

Planning

Use the plan you created with your advisor to review the online course schedule once it becomes available on March 1st.

Create a tentative schedule on a drop/add form. Use a separate form for each term. The form should include days, times, and campus locations.

Registration

Once your forms are approved and signed, take them to the records transaction windows on your registration day. Remember, a signed form does not guarantee you a seat in a closed section.

1

Advising

Call 616-331-6890 to schedule an advising appointment where you will create or review your academic plan.

2

Approval

Bring your completed drop/add forms to the CECI Undergraduate Advising Center during normal business hours. We will review the forms, compare it to your academic plan, and approve it or offer suggestions for improvement. Please allow at least one business day for review.

Forms can be dropped off beginning March 1st.

3

4

College of Education and Community Innovation
Undergraduate Advising Center

321C DEV ~ www.gvsu.edu/ceciadvising ~ ceciadvisor@gvsu.edu

GRAND VALLEY STATE UNIVERSITY REGISTRATION and DROP-ADD FORM

Last Name	First	Initial
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Local Street Address

Student Number _____ Date _____

City	State	Zip
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 Fall Winter Sp/Su
Year Session

Local Telephone Number

ADD OR REGISTER				DROP			
Subject	Number	Section	Credit	Subject	Number	Section	Credit

Undergraduate students in other than good standing need advisor approval to register.

Advisor Signature: _____

FOR OFFICE USE ONLY - Date Received by Records: _____ Refund Period (circle one): 100% 75% 0%

ATTENTION: CECI STUDENTS WITH ADVISOR HOLDS

CECI Students must provide the day/time and location of the course before an advisor will review your registration form for approval to lift the advisor hold. Please be sure to provide this information in addition to what is requested by the records office above.

[illegible]

Last Name		First	Initial	Local Street Address		
Student Number		Date		City	State	Zip
_____	Fall	Winter	Sp/Su	_____		
Year	Session		Local Telephone Number			

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