



Semester Planner

Fall _____ Spring _____

Name _____

Advisor _____

Advisor e-mail _____ Phone _____

Advisor Office location/hours _____

Course	Professor / email	Office location/hours
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8 AM					
9 AM					
10 AM					
11 AM					
12 noon					
1 PM					
2 PM					
3 PM					
4 PM					
5 PM					
6-9:20					