

Advising and Academic Approval Form (AAA) for APK 4940 – Practicum in Kinesiology

ADVISOR APPROVAL

Student Name: _____ Panther ID: _____

Student FIU email: _____ Cell #: _____

Is this student an International Student? Yes ☐ No ☐

Core Curriculum Completed: Yes ☐ No ☐ Cumulative GPA: _____

Total Credits Earned: _____ In Progress: _____

Current Courses: _____

Courses to be taken with APK 4940: _____

Additional Courses/Requirements Needed: _____

Approved for APK 4940: ☐

Denied for APK 4940: ☐

Advisor's Name: _____ Date: _____

**Advisor's Signature: _____

Comments: _____

**Student Signature: _____ Date: _____

ACADEMIC ACCOMMODATIONS

Student requesting academic accommodation: Yes ☐ No ☐

Type of academic accommodation:

☐ GPA ☐ Taking more than 15 credits total ☐ Course replacement ☐ Other

Comments: _____

**If academic accommodations box is checked YES, student is responsible for BOTH tasks below:

1. Dr. Watson's signature is required on this form. Email form to him after advisor and student parts are complete.
2. Email Dr. Watson, Professor Lugo, and advisor indicating the specific academic accommodation(s) requested
lawatson@fiu.edu, lugos@fiu.edu and advisor's email

**Program Leader Name: Dr. Watson, Signature: _____ Date: _____