

Pueblo of Isleta - Department of Education

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COURSE SCHEDULE VERIFICATION

TO BE COMPLETED BY ACADEMIC ADVISOR

This course schedule verification has been established in accordance to meet the student's academic requirement for success and in alignment with the Institution degree plan.

Student Name:		Program:	Program:		
ID Number:		Concentra	Concentration: Expected Graduation Date:		
Institution:		Expected (
Courses to be Completed:	Fall	Spring	Summer		
Note: Repeated courses, wil			ner Education Program	-	
Course Number	Credit Hour(s)	Tucolo of Isleta IIIgi	Course Title		
Total Credit Hours					
Comments:					
Prepared byEmail			PhoneFax		
Academic Advisor Signatu	re		Date		