

Buffalo State College Music Department  
PDR Advisement Form

Student \_\_\_\_\_

Date \_\_\_\_\_

Student's greatest strengths:

Areas in need of improvement or growth:

\_\_\_\_\_  
Student Signature\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty Advisor Signature\*

\_\_\_\_\_  
Date

*\*Signature signifies acknowledgement of PDR advisement session*