

RADFORD UNIVERSITY

Department of Physical Therapy

Advisor/Advisee Consultation Record

Date	Discussion Topics	Action to be taken	Follow-up date on action
xx/xx/xx	<p>Advisor: Name Office phone: 540-224-xxxx ; Email: xxxx@radford.edu</p> <p>Expected Advisement Topics: _____Advisor/Advisee Expectations _____Student expectations _____Order for seeking help (1. Instructor; 2. Advisor; 3. Chairperson/Program Director) _____Review of APTA Core Values and/or CPI _____Reminder: Refer to department website for most recent handbook editions _____Community service (hours per semester, process, and progress)</p>		

Advisee Signature: _____ **Advisor Signature:** _____ **Date:** _____

RU DPT Contact Information: Chairperson/Program Director (540-224-6675); Administrative Assistant (540-244-6657); **Security** (540-224-8200)

Counseling Services Available:

- RU Student Counseling Services. (It is the student’s responsibility to start the process.) Located: Tyler Hall, Lower Level, 8 am to 5 pm, M-F fall/spring semesters; Telephone #: (540) 831-5226.
- JCHS Counseling Services. (It is the student’s responsibility to start the process.) Located: Student Affairs, 4th floor Carilion Roanoke Community Hospital (CRCH), 8 am to 5 pm, M-F; Telephone #: (540) 985-8395.