



Carteret County Schools Graduation Project **ADVISOR PREFERENCES**

Student Name: _____

You will have a staff/faculty member as your personal academic advisor throughout your project experience. This person can be any member of the ECHS staff. Advisors will be assigned and whenever possible you will be paired with someone you request. However, there is no guarantee of that since each staff/faculty member will be working with 2-3 seniors.

Please indicate the first and last names of at least 5 staff/faculty members you would prefer to work with throughout this experience. Please return this form to your English teacher or Mrs. Sheehan by the due date listed in your packet.

1. _____
2. _____
3. _____
4. _____
5. _____

If you have additional possible preferences, please list them below: