

CONSULTATION AVAILABILITY

Academic Year 2023/24

Professor: _____

Department: _____

Office: _____

Email: _____

| DAY | TIME SLOT | MODE / ROOM | ADDITIONAL NOTES |
|-----------|-----------|-------------|------------------|
| Monday | | | |
| Tuesday | | | |
| Wednesday | | | |
| Thursday | | | |
| Friday | | | |

* Please schedule appointments at least 24 hours in advance via the online portal or email.