CHANGE OF GRADUATE ACADEMIC ADVISOR

Last Name______________________________ First Name________________________ M.I. __________

Student G# ____________________________

Student’s Signature_________________________________________ Date____________________

Current Program______________________________________________

Current Advisor_________________________ New Advisor____________________________

Any change in academic advisor must be approved by the program coordinator. If you have no preference, an advisor will be assigned.

Reason(s) for request:

Check one: ______ Scheduling conflicts

______ Communication difficulties.

______ Other ________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

APPROVAL: Department Use Only:

Academic Program Coordinator: ________________________________ Date: ________________

Feb. 2012
CHANGE OF GRADUATE ACADEMIC ADVISOR

Purpose: To request a change of graduate academic advisor within the student’s program for the reasons indicated (i.e., scheduling conflicts, communication difficulties, other).

Instructions: Students must first identify and discuss the change with their prospective advisor. The following signature is needed for approval:

- Academic Program Coordinator

The form is then processed within the program.

Notes: The actual advisor change is entered in the system by the Program Office Manager for their program and the form should remain in their unit files.

The form **does not** require the signature of the Associate Dean for Student and Academic Affairs (Dr. Ellen Rodgers).