

Office of the Registrar

Change of Program or Advisor



Student Name

First

Middle

Last

Student ID Number

Program _____ Degree _____ Date _____ (mm/dd/year)

Please Check Applicable Change (s):

Semester Fall Spring Summer Year _____

Change of Program Current Program: _____

Current Program Chair Signature: _____ Date: _____

Current Dean Signature: _____ Date: _____

New Program: _____

New Program Chair Signature: _____ Date: _____

New Dean Signature: _____ Date: _____

Change of Advisor

Current Advisor: _____ Signature _____

New Advisor: _____ Signature _____

Program Chair*: _____ Signature _____

***Program Chair signs for PhD only if there is no change of program**

Received by: _____

Date: _____

Registrar's Office Use Only

Processed by: _____

Signature: _____

Date: _____

Student Advised: **YES**

Confirmed by: _____

Date: _____

GPC Advised: **YES**

Confirmed by: _____

Date: _____