

SCHOOL OF ENGINEERING AND APPLIED SCIENCE

ADVISOR CHANGE REQUEST

STUDENT'S
NAME _____

SOC. SEC.
NO. _____

MAJOR OR AREA OF
INTEREST _____

CURRENT
ADVISOR _____

NEW ADVISOR _____
(Will be assigned if not prearranged by student)

APPROVAL

CURRENT ADVISOR DATE

(All pertinent records should be forwarded to the new advisor)

NEW ADVISOR DATE

ACADEMIC DEAN DATE

FILE NAME ENTERED SIS