

**COLLEGE OF ENGINEERING
FORM for OFFICIAL CHANGE**

Change: Address Name Social Security Number Phone Number
 Citizenship Residency Major Area other

_____ **SS #:** _____
Last Name **First name**

Address: _____

Phone: (local) _____ **E-Mail:** _____

ALWAYS COMPLETE TOP PORTION OF THIS FORM!!

CHANGE OF ADVISOR

I am requesting a change of advisor from _____ to _____
(current advisor) **(new advisor)**

Student signature _____ Date: _____

Current Advisor signature _____ Date: _____

New Advisor signature _____ Date: _____

(All signatures are required for the change and a new Program of Study submitted)

CHANGE OF STATUS/PROGRAM

(Examples of status listing are: FT/full-time, PT part-time, GE/ASC/SPC, NT/non-thesis option, T/Thesis option, W/withdrawal from the program, etc)

I request to: _____

Student signature _____ Date: _____

Advisor signature _____ Date: _____

PLEASE return this form to the Graduate Office, 701 ERC