Department of Human & Organizational Development

CHANGE OF ADVISER

Date: _____

Student Name: _____

Student I.D. #: _____

Program Name: _____

I am hereby formally requesting to change my advisor in the Department of Human & Organizational Development. I have obtained the consent of the prospective new advisor.

I would like to change from current advisor _____ to prospective new advisor _____ upon the approval of the Program Director and Department Chair.

My reason for this request is as follows:

I understand that upon reviewing this request, the program director will send me a written notification of the decision.

_____		_____	
Student Signature	Date	New Advisor Signature	Date
_____		_____	
Program Director Signature	Date	Department Chair Signature	Date