



Advisor Switch Form

Student Information

Name:

Date:

Date of Entry into the Program (month and year):

Reason for Advisor Switch

Describe the reason(s) you are seeking to switch advisors:

Process

To facilitate the best transition possible, please outline your plan for switching advisors below.

When will the switch take place officially?

Will funding switch from your current advisor to your new advisor? If so, when?:

Which projects will you complete with your current advisor prior to the switch?:

Which projects will be ongoing with your current advisor after the switch (if any)?:

Approval: Signatures

Student:

Print Name:

Date:

Current Advisor:

Print Name:

Date:

New Advisor:

Print Name:

Date:

Program Chair:

Print Name:

Date: