WHETTEN GRADUATE CENTER | 438 WHITNEY ROAD EXTENSION, UNIT-1152, STORRS CT 06269-1152 TELEPHONE: (860) 486-3617 | FACSIMILE: (860) 486-6739 | GRAD.UCONN.EDU

CHANGE OF MAJOR ADVISOR

| FIRST NAME | | |
|--|--|--|
| LAST NAME | | |
| STUDENT ID # (SEVEN DIGITS) | NETID | PHONE |
| EMAIL | | |
| Field of study | | Degree sought |
| | NAME TYPED OR PRINTED | SIGNATURE |
| Former advisor | | _ |
| New advisor | | _ |
| • The signature of the n for informational purpo The new major advisor (and area of concentration | new major advisor must appear above. The oses only. It does not signify permission of must hold an appointment to The Gradua tion, if any) and also for the level of the de | e signature of the former major advisor is requested r consent on the part of the former major advisor. Ite Faculty specifically in the student's field regree program to which the student has been cation for admission is required rather than this |
| • Changes of associate | e advisor should be reported on the Reque | st for Changes to Plan of Study form. |
| | FOR GRADUATE SCHOO | L USE ONLY |
| New advisor number | | |
| Date recorded | Recorded by | |

