

**CHANGE OF EDUCATIONAL OBJECTIVES
AND/OR DESIGNATION OF ADVISOR**

DATE:

TO: REGISTRAR'S OFFICE

FROM:

Chairman

Student's Name:

Student's ID Number:

Student's Address:

INITIAL DECLARATION OF EDUCATION OBJECTIVE:

Degree:

Major/Minor/Teaching Option:

CHANGE IN DECLARATION OF EDUCATIONAL OBJECTIVE:

From:

To:

CHANGE OF ADVISOR:

From:

To:

Note: The former advisor should send the student's folder to their new advisor immediately.

Student's Signature

Chairman's Signature

cc Division Offices
Advisors Concerned
Student

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