

Request to Change Advisor or Program



I.D. #: _____ Student Name: _____

Please fill the entire form out. If you are only requesting a new advisor please proceed directly to **ADVISOR INFORMATION**.

PRESENT

PROGRAM: Degree: _____ Length of Degree: _____

Major/First Concentration: _____

Minor/Second Concentration: _____

REQUESTED

PROGRAM: Degree: _____ Length of Degree: _____

Major/First Concentration: _____

Minor/Second Concentration: _____

ADVISOR

INFORMATION: Current Advisor: _____

Signature: _____ Date: _____

New Advisor: _____ (if applicable)

Signature: _____ Date: _____

- I have checked and meet the prerequisites for the above Request Program (eg. Pure Math 30)
- I understand that changing programs may have financial aid implications and I will be required to repay financial aid for which I am no longer eligible. Changing programs on or after the first day of exams in the term in question will have no financial implications.

Signature: _____ Date: _____

***Please return to Office of Enrolment Management and Registrar. You will be notified of any difficulties with your request.**

FOR OFFICE USE ONLY

Director of Enrolment Management & Registrar	Associate Registrar	Registry Officer
<input type="checkbox"/> Prerequisites	<input type="checkbox"/> Change Advisor	<input type="checkbox"/> Reapply Transfer Credit
Fin Aid	<input type="checkbox"/> Change Program	<input type="checkbox"/> Retag Transfer Credit
<input type="checkbox"/> Add: _____	<input type="checkbox"/> Change Major/Minor/Concentrations	
<input type="checkbox"/> Remove: _____	<input type="checkbox"/> Retag Courses	
<input type="checkbox"/> Approval for Degree Change:	<input type="checkbox"/> Check/Apply Fin Aid	
_____ Sign/Date	_____ Sign/Date	_____ Sign/Date