CHANGE OF ADVISOR REQUEST

Student Name: ___________________________________________ Date: __________________________

Student ID #: ____________________________________________

Student's Major Or Regional Campus: ________________________________

Present Advisor: 

Print Name __________________________________ Signature __________________________

Proposed Advisor: 

Print Name __________________________________ Signature __________________________

___________________________________ Associate Dean, Student Affairs

Date __________________________

Student sends original document with signatures to:

Student Affairs RAS E201
1200 Herman Pressler
Houston, TX 77030

Questions: 713-500-9032

(Office Use Only) Copies to:

- Current Advisor
- Proposed Advisor
- Student
- Student Files

Update SIS-ADVR Screen

Revised 11/4/2010