



William & Mary
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CHANGE OF MAJOR ADVISOR

Student's Name (printed): _____ ID#: _____
Last First MI

E-mail address: _____@email.wm.edu

Local Telephone: _____ Planned Date of Graduation: _____

I wish to change my current major advisor:

Current Advisor's Name (printed): _____

Current Advisor's Department: _____

To the following advisor:

New Advisor's Name (printed): _____

New Advisor's Department: _____

Reason for Change (please describe):

Student's Signature (in ink): _____ Date: _____

New Advisor's Signature (in ink): _____ Date: _____

FOR OFFICE USE ONLY

Received _____ Posted _____ Initials _____