



WAYNE STATE UNIVERSITY

Department of Psychology

GRADUATE CHANGE OF ADVISOR

To: **Graduate Committee Chairperson**

From (student name) _____

Date _____

I would like to change my advisor and have this change recorded in my file.

My advisor was _____

and I have asked _____ to serve as

my new advisor. Their signatures below indicate that they have agreed to this change.

Former advisor signature

New advisor signature
