ADVISOR CHANGE REQUEST FORM

By signature of this form, I am formally requesting to change advisors within my major.

Name	MSU NetID	MSU 9-digit number
Major	Concentration	Local Phone Number
Prospective Advisor's N	Tame (Print)	
Comments:		
Student's Signature		Date
Prospective Advisor's S	ignature	Date
•		
OSS USE ONLY:	Confirmed:	Date: