



APPLICATION FOR CHANGE OF ACADEMIC/THESIS ADVISER

Date Accomplished:

Student No.	Surname	First Name	Middle Name	Course & Yr.
18-1-00978	Buhi	Junmark	Tapitan	BSA-4

From: LUZ G. ASIO

Printed Name & Signature of Former
Academic Adviser

To: BABYLYN C. LAMBERT

Printed Name & Signature of
New Academic/Thesis Adviser

Reason(s) for change of academic adviser:

Change of major course.

Signature of Student

Recommending Approval:

ULYSSES A. CAGASAN

Printed Name & Signature
of Former Department Head

MARIA HAZEL I BELLEZAS

Printed Name & Signature
of New Department Head

Approved:

VICTOR B. ASIO

College Dean

Date: _____

Noted:

MARWEN A. CASTAÑEDA
University Registrar

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