



APPLICATION FOR CHANGE OF ACADEMIC/THESIS ADVISER

Date Accomplished JULY 5, 2023

Student No.	Surname	First Name	Middle Name	Course & Yr.
21-1-02291	GONZALES	JEZREEL	C.	BSA-2

From:

RUTH O. ESCASINAS

Printed Name & Signature of Former
Academic Adviser

To:

Printed Name & Signature of
New Academic/Thesis Adviser

Reason(s) for change of academic adviser:

CHANGE OF MAJOR FIELD

Signature of Student

Recommending Approval:

DIONESIO M. BAÑOC

Printed Name & Signature
of Former Department Head

SUZETTE B. LINA

Printed Name & Signature
of New Department Head

Approved:

VICTOR B. ASIO

College Dean

Date: _____

Noted:

MARWEN A. CASTAÑEDA

University Registrar

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