



APPLICATION FOR CHANGE OF ACADEMIC/THESIS ADVISER

Date Accomplished: August 01, 2022

Student No.	Surname	First Name	Middle Name	Course & Yr.
19-1-02151	ADLAWAN	JOVIC	CAGOYONG	BSA-3

From:

ULYSSES A. CAGASAN
Printed Name & Signature of Former
Academic Adviser

To:

LOREMES S. CAGANDE
Printed Name & Signature of
New Academic/Thesis Adviser

Reason(s) for change of academic adviser:

My former adviser will be on Sabbatical Leave.

Signature of Student

Recommending Approval:

RUTH O. ESCASINAS
Printed Name & Signature
of Former Department Head

RUTH O. ESCASINAS
Printed Name & Signature
of New Department Head

Approved:

VICTOR B. ASIO
College Dean
Date: _____

Noted:

MARWEN A. CASTAÑEDA
University Registrar

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