



**APPLICATION FOR CHANGE OF ACADEMIC/THESIS ADVISER**

Date Accomplished : July 29, 2022

Student No.	Surname	First Name	Middle Name	Course & Yr.
20-1-00039	ROTAIRO	ELIZABETH JADE	VERBA	BSA-3

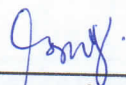
**From:**

SUZETTE B. LINA  
Printed Name & Signature of Former  
Academic Adviser

**To:**

Printed Name & Signature of  
New Academic/Thesis Adviser

Reason(s) for change of academic adviser:

  
Signature of Student

**Recommending Approval:**

SUZETTE B. LINA  
Printed Name & Signature  
of Former Department Head

ELVIRA OCLARIT  
Printed Name & Signature  
of New Department Head

**Approved:**

VICTOR B. ASIO  
College Dean  
Date: \_\_\_\_\_

**Noted:**

MARWEN A. CASTAÑEDA  
University Registrar

*Distribution of Copies: Student, Adviser, College, Registrar*