



CHANGE OF SUPERVISOR

Name: _____ Student Number: _____

Program: _____ Degree: _____ Date of Request (YYYY-MM-DD): _____

This is a request to: Change Supervisors Add a Co-Supervisor

Notes:

Approval of current Supervisor

Signature Name (please print) Date (YYYY-MM-DD)

Approval of new (Co-)Supervisor

Signature Name (please print) Date (YYYY-MM-DD)

Approval of Graduate Advisor

Signature Name (please print) Date (YYYY-MM-DD)

----- **Office Use Only** -----

Approved? Y N Effective: _____ Date: _____

Comments: _____