



Graduate Studies Program
Department of Electrical and Computer Engineering
227 Drees Laboratory - 2015 Neil Avenue
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Change of Advisor Form

Date _____

This is to certify that the advisor of:

Social Security Number: _____ - _____ - _____

has been changed from:

_____ Prof.

to:

_____ Prof.

Signature of Graduate Student

This advisor assignment is: Temporary
 Permanent

Signature of Current Advisor

Signature of New Advisor