
SCHOOL OF COMMUNICATION

CHANGE OF ADVISOR NOTIFICATION FORM

DATE: _____

Graduate Program Office
School of Communication

The advisor of _____,

OSU Name.# : _____,

Is now Professor _____,
(new advisor, please print name)

replacing Professor* _____
(previous advisor, please print name)

in (circle one) PhD Program

MA Program

Please add this to the student's records. Thank you for your assistance in this matter.

Sincerely,

_____ Signature of New Advisor

_____ Signature of Chair of GSC

**Student, please inform your former advisor of this change by placing a copy of this form in your former advisor's faculty mailbox.*

Please submit this form to the School of Communication Graduate Program Office for Processing.