## Indiana University Informatics School of Informatics, Computing, and Engineering

## Advisor, Program or Track Change Form Fill out only the sections that pertain to this request.

Student's Name:	IUID#:	
Student's Email Address:		
Advisor Change		
Currently, my advisor isto		am requesting a change
Program/Track Change		
<b>Note:</b> Students must submit a one-page justific departments/programs/tracks.	cation for requesting to change	
Currently, I am in the Ph.D./MS/Department		
	track and I am requesting to ch	nange to the Informatics
Ph.D./MS/Department	program	track.
Student's Signature:	Date:	
Approvals		
Current Advisor's Signature:	Date:	
Current Program/Track Director's Signature:	Date:	
Current Director of Graduate Studies' Signature	e:	Date:
New Advisor's Signature:	Date:	
New Program/Track Director's Signature:		
New Director of Graduate Studies' Signature		

Please submit completed form to the Informatics Graduate Studies Office