Advisor Selection Form

Student Name: ____________________________________________ ID #: __________________________

Program of Emphasis: __________________________________________________________________________________

NOTE: This form does not change your POE and should be used in conjunction with the Final POE form found on
the Registrar’s website.

Anticipated Graduation Date: Month (May, August, December): __________ Year: __________

I am adding or changing academic advisor(s). My advisors on record should now be:

POE Advisor: _______________________________ _______________________________ POE Advisor signature (if new)

General Advisor: _______________________________ General Advisor signature (if new)

Academic Advisor: _______________________________ Academic Advisor signature (if new)

(NOTE: only used if start date is 19/FA or after)

Mentor: _______________________________ Mentor signature (if new)

(NOTE: only used if start date is 19/FA or after)

Temporary Advisor: _______________________________ Temporary Advisor signature (if new)

(NOTE: only used in event of advisor sabbaticals, etc.)

Student Signature: _______________________________ (Date)

Return completed form to Registrar’s Office in Founders Hall.