Baker University
Student Academic Success

Change of Advisor Request

New advisor signature is required.

Return to SAS (Room 120) in the lower level of the Collins Library

Name: _____ Student ID: _____
First Middle Initial Last

Current Advisor: _____

Intended Major(s) (if known):_____

Preferred New Advisor: _____

New Advisor Signature (**required**):_____ Date: _____

Freshmen will switch Academic Advisors upon the completion of their first semester.

_____ Date: _____
Student Signature

SAS use only

Received by:_____ Date: _____

Email sent to Advisor:_____ Date: _____

Folder del to New Advisor:_____ Date: _____

Cvue: _____ Advising List: _____ Email sent to student: _____