Change Form
Dissertation Advisor/MTA/Advisory Committee

<table>
<thead>
<tr>
<th>Student name:</th>
<th>Matriculation Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Training Area:</td>
<td>Proposed Training Area:</td>
</tr>
<tr>
<td>Current Dissertation Advisor: (Print and Sign)</td>
<td>Proposed Dissertation Advisor: (Print and Sign)</td>
</tr>
<tr>
<td>Current Chair Advisory Committee: (Print and Sign)</td>
<td>Proposed Chair Advisory Committee: (Print and Sign)</td>
</tr>
<tr>
<td>Current Advisor: (Print and Sign)</td>
<td>Proposed Advisor: (Print and Sign)</td>
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<td>Proposed Advisor: (Print and Sign)</td>
</tr>
</tbody>
</table>

*(For Multidisciplinary Training Area change):
I agree to fulfill the requirements of the proposed training area.

Student Signature __________________________ Date __________

*(For Dissertation Advisor Change)

To be completed by the new Dissertation Advisor:

I understand that I will be responsible for the stipend, tuition and fees for the student during the PhD work, until the thesis is defended, with appeals possible for unexpected lapses in funds.

Grant # student will be charged to: __________________________
(Form will not be processed without this #)

**Dissertation Advisor (Signature) __________________________ Date __________

APPROVALS

Department Administrator __________________________ Date __________
(Print and Sign)

Graduate School - Administrator __________________________ Date __________

MTA Co-Director __________________________ Date __________
(Print and Sign)

Graduate School - Dean __________________________ Date __________

Rev 4/09