

CHANGE OF ADVISOR FORM (MASTERS STUDENTS ONLY)

Please complete this form to change your faculty advisor, and return it to the Dean of Students Office at the Divinity School or by email: divinitydos@uchicago.edu.

Name of Student: _____ UCID: _____

Email: _____

Current Degree Program (circle one): AMRS MA MDIV

I have consulted with _____ and am requesting that they be appointed as my new formal faculty advisor.

Student Signature: _____

Date: _____

New Advisor Signature: _____

Date: _____

DOS Signature: _____

Date: _____