

# SIMPSON COLLEGE

## CHANGE/ADD ADVISOR FORM

Student name: \_\_\_\_\_ I.D. \_\_\_\_\_  
Please print your name

Campus box \_\_\_\_\_ Email \_\_\_\_\_

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### CHANGE YOUR CURRENT ADVISOR

**Please complete this section if you need to change your current advisor.**

Current Advisor (print name) \_\_\_\_\_

Current Advisor signature \_\_\_\_\_ Date \_\_\_\_\_

New Advisor (print name) \_\_\_\_\_

New Advisor signature \_\_\_\_\_ Date \_\_\_\_\_

Student signature \_\_\_\_\_ Date \_\_\_\_\_

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### ADD AN ADDITIONAL ADVISOR

**Please complete this section if you need to add a second or third advisor.**

2<sup>nd</sup> Advisor (print name) \_\_\_\_\_

2<sup>nd</sup> Advisor signature \_\_\_\_\_ Date \_\_\_\_\_

3<sup>rd</sup> Advisor (print name) \_\_\_\_\_

3<sup>rd</sup> Advisor signature \_\_\_\_\_ Date \_\_\_\_\_

Student signature \_\_\_\_\_ Date \_\_\_\_\_

*Submit this form, with signatures, to the Office of the Registrar.*

Recorded by \_\_\_\_\_ Date \_\_\_\_\_