

**Ed.M. PETITION FOR CHANGE OF ACADEMIC ADVISOR**

Please confer with your original and prospective advisor as you consider a change of advisor. Consider also discussing the matter with your program director, program administrator and/or the Assistant Director for Master's Studies. Please complete this form, obtain the signature of your new advisor, and submit to the Ed.M. program office, Longfellow 042.

Name: \_\_\_\_\_ Harvard ID #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

Degree:  Ed.M.  C.A.S. Program Name \_\_\_\_\_

**SIGNATURE OF NEW ADVISOR**

Please print the name of your present advisor and ask the new advisor to sign here to indicate approval of the change of advisor request. Please note that a staff member's signature is not acceptable.

I would like to change my academic advisor as follows, from: \_\_\_\_\_  
(print name of original advisor)

to: \_\_\_\_\_  
(print name of new advisor) (signature of new advisor)

**MY REASONS FOR THIS REQUEST ARE AS FOLLOWS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Assistant Director for Master's Studies Signature**

\_\_\_\_\_  
**Date**

Approved  Not Approved  Form Incomplete; resubmit

**Confirmation email from the Office of the Registrar will be sent to:**  
Student, Associate Dean for Degree Programs, Former Advisor, New Advisor, Program Director, Program Administrator