



Request for Change of Advisor and/or Co-advisor

1. Student's Name (Mr./Mrs./Miss).....Student ID
 2. Degree and Plan Doctoral Degree Plan 1.1 Plan 1.2 Plan 2.1 Plan 2.2
 Master's Degree Plan A 1 Plan A 2
 Program.....Department.....Faculty.....
 3. Dissertation Topic (if any)
 4. Dissertation Code
 5. Advisor/Co-advisor to be appointed (identified with academic position, expertness and responsibility):
Previously Appointed
 1.Name and Title of Advisor Responsibility %
 Field of Specialization Sign
 2.Name and Title of Co-Advisor (If required) Responsibility..... %
 Field of Specialization Sign
To be Appointed
 1.Name and Title of Advisor Responsibility %
 Field of Specialization Sign
 2.Name and Title of Co-Advisor (If required) Responsibility..... %
 Field of Specialization Sign
- Reason of Change.....
6. To chairperson of graduate study / Faculty Committee
 Sign.....Chairman of the Program Committee Sign.....Head of the Department
 (.....) (.....)
 Date...../...../..... Date...../...../.....

For faculty official use only	Graduate study faculty committee
<p>Dear Chairperson of Graduate Study / Faculty Committee Please To consider and approve the advisor committee of (Mr/Mrs./Miss)..... student ID No....., the student of <input type="checkbox"/> Master <input type="checkbox"/> Ph.D. program in Environmental Management as the list above (.....) Date/...../.....</p>	<p>DECISION <input type="checkbox"/> approved <input type="checkbox"/> Non – approved (Reason)..... (Signature) (.....) (Chairperson of Graduate Study / Faculty Committee) Date...../...../.....</p>

Note: 1. Please fill the form by typing and limited to one page
 2. Inform to Graduate School after faculty's approval