



UNIVERSITY of MARYLAND  
EASTERN SHORE

DIVISION of ACADEMIC AFFAIRS  
School of Graduate Studies

***CHANGE OF ADVISOR FORM***

Student's Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First Middle

Student's I.D.: \_\_\_\_\_ Degree Program: \_\_\_\_\_

\_\_\_\_\_  
Current Advisor's Name and Signature Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Current Program Coordinator's Name and Signature Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
New Advisor's Name and Signature Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
New Program Coordinator's Name and Signature Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

I request to change academic advisors.

\_\_\_\_\_  
Student's Name & Signature (mandatory) Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please return this form to:**

School of Graduate Studies  
University of Maryland Eastern Shore  
Engineering and Aviation Science Complex, Suite 3046,  
Princess Anne, Maryland - 21853, Phone # 410-651-6507,  
Email: [graduatestudies@umes.edu](mailto:graduatestudies@umes.edu)