

Name _____ 7 Digit SOLAR ID _____

UW-Parkside Email _____@rangers.uwp.edu Phone _____

Requested advisor:	Current advisor:	Major, minor, etc. that the advisor is assigned for:
_____	_____	_____
_____	_____	_____
_____	_____	_____

NOTE: Major, minor, certificate, etc. within same department can be listed on one form; complete a separate form for different departments.

Student's Signature _____ Date _____

Departmental Approval _____ Date _____

Department: Submit this form to the Office of the Registrar (WYLL D187) for processing.

