

CHANGING ACADEMIC OR RESEARCH SUPERVISOR

Last name: _____		First name: _____		Student no.: _____
MI <input type="checkbox"/>	DESS <input type="checkbox"/>	MEng <input type="checkbox"/>	MScA <input type="checkbox"/>	PhD <input type="checkbox"/>
Option or orientation: _____		Program: _____		
		Microprogram: _____		

Change of supervisor and/or co-supervisor(s) of academic or research
(Graduate Studies – General Regulations, Article 9.2)

Reason for the request: _____

In the case of a second co-supervisor, justify the request:

Student's signature Date

SUPERVISOR OR CO-SUPERVISOR(S) BEFORE CHANGE

Supervisor of academic or research : _____
(handwritten letters) Signature and date

Co-supervisor of academic or research : _____
(handwritten letters) Signature and date

Co-supervisor of academic or research : _____
(handwritten letters) Signature and date

SUPERVISOR OR CO-SUPERVISOR(S) AFTER CHANGE

Supervisor of academic or research : _____
(handwritten letters) Signature and date

Co-supervisor of academic or research : _____
(handwritten letters) Signature and date

Co-supervisor of academic or research : _____
(handwritten letters) Signature and date

RECOMMENDATION OF THE DEPARTMENT

Signature of the department director Date

Signature of Graduate Programs Coordinator Date

RESERVED FOR THE REGISTRAR'S OFFICE

Important: The change goes into effect after being submitted for the approval of the Registrar's Office.

Authorized signature for the Registrar's Office Date