



**APPLICATION FOR CHANGE OF ACADEMIC ADVISER**

Date Accomplished: May 09, 2024

Student No.	Surname	First Name	Middle Name	Course & Yr.
20-1-00161	CAGABHION	RAYMOND		BSA-2

**From:**

**To:**

  
MARIEDITH I. BAGARINAO  
 Printed Name & Signature of Former  
 Academic Adviser

\_\_\_\_\_  
 Printed Name & Signature of  
 New Academic Adviser

Reason(s) for change of academic adviser:

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\_\_\_\_\_  
 Signature of Student

**Recommending Approval:**

DIONESIO M. BAÑOC  
 Printed Name & Signature  
 of Former Department Head

\_\_\_\_\_  
 Printed Name & Signature  
 of New Department Head

**Approved:**

VICTOR B. ASIO  
 College Dean  
 Date: \_\_\_\_\_

**Noted:**

HOMER LOIS P. NAPOLES  
 OIC, University Registrar

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