

Sociology Department  
UC Berkeley

**CHANGE of PERSONAL ADVISOR**

Student

Current personal advisor

proposed personal advisor

student signature: \_\_\_\_\_

date: \_\_\_\_\_

Proposed advisor's signature \_\_\_\_\_

date: \_\_\_\_\_

Graduate Advisor signature \_\_\_\_\_

date: \_\_\_\_\_

Return this **form** to the Graduate Office.