



**Student/Co-Adviser  
Change Form**

**Name** \_\_\_\_\_ **PSU ID#** \_\_\_\_\_

**STUDENT**

I agree to change my co-advisers from \_\_\_\_\_ and \_\_\_\_\_ to  
\_\_\_\_\_ and \_\_\_\_\_ for my M.S. / Ph.D. studies at IST.

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

\_\_\_\_\_  
Date

**NEW CO-ADVISERS**

I agree to co-advise \_\_\_\_\_ during their studies at IST.

\_\_\_\_\_  
Co-Adviser Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Adviser Signature

\_\_\_\_\_  
Date

**PREVIOUS CO-ADVISERS**

I agree to **NOT** co-advise \_\_\_\_\_ during their studies at IST.

\_\_\_\_\_  
Co-Adviser Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Adviser Signature

\_\_\_\_\_  
Date

**Return form to the Graduate Programs Office in the Westgate Building, for the Graduate Programs Director approval.**

\_\_\_\_\_  
Graduate Programs Director Signature

\_\_\_\_\_  
Date