A-6

The University of Louisiana at Monroe College of Arts and Sciences Advising Form: **Switching Sections**

Advisor	_ Name	- Student Number -	- Date
From to Reason for Switch Student's Signature and Date Advisor's Signature and Date Approve Disapprove Disapprove			
From to Reason for Switch Student's Signature and Date Advisor's Signature and Date Approve Disapprove Disapprove	_ Advisor	Major —	- Course
Reason for Switch Student's Signature and Date Advisor's Signature and Date Approve Disapprove			
Student's Signature and Date Advisor's Signature and Date Approve Disapprove	<u> </u>		
Advisor's Signature and Date	- Reason to Switch		
Advisor's Signature and Date			
Terminal Instructor's Signature and Date	Student's Signature and Date —		
Terminal Instructor's Signature and Date			
Terminal Instructor's Signature and Date	Advisor's Signature and Date ————————————————————————————————————		
— Terminal Instructor's Signature and Date —			
— Terminal Instructor's Signature and Date —			Disapprove
1 Approximation 1	Terminal Instructor's Signature and Date		I □ Approve
Approve			
Disapprove			Disapprove
Student's Department Head's Signature and Date — Approve	Student's Department Head's Signature and Date ——		☐ Approve
Disapprove			