Change of Advisor Form

Club Information: (Please fill in all fields)		
Club Name	Semester/Y	ear
Club President	Current Cl	ub
Name	Advisor Na	me
Club	Current Cl	ub
President	Advisor	
WSCO Email	WSCO Em	ail
Reason for Change: (Please provide the reason for changing Advisors)		
Reason for Change: (Please provide the feason for changing Advisors)		
New Club Officer: (Please fill in all fields)		
New Club Advisor		
Name		
New Club Advisor		
WSCO Email		
Required Signatures:		
required Digitatules.		
Old Advisor		Date:
<u> </u>		
New Advisor Date:		Date:
Club President		Date: