**Termination of Advising Relationship Application Form**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date |  | Received Date |  | |
| Student Name |  | Agree □  Disagree □ | Signature |  |
| Advisor |  | Agree □  Disagree □ | Signature |  |
| Reasons of Termination | | | | |
|  | | | | |
| Committee Opinions | | | | |
|  | | | | |
| Committee Decision | | | | |
|  | | | | |

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**Termination of Advising Relationship Replied Form**

****Received Date： Recipient：