



Faculty of Commerce

Bachelor of Commerce Honours Supervisor Change

Student Details

Name	<input type="text"/>	Number	<input type="text"/>
Specialisation	<input type="text"/>		
Honours Commencement Year	<input type="text"/>		

Current Supervisor Details

Supervisor 1	<input type="text"/>
Supervisor 2	<input type="text"/>

Please indicate the change of supervision that is required

A temporary change while one or more supervisors are absent (complete Section A)

A change of supervision for the remainder of candidature (Complete Section B)

Section A: Temporary Change

Please indicate which supervisor will be absent and the date of absence from campus:

Name	<input type="text"/>	Date of absence	<input type="text"/>
------	----------------------	-----------------	----------------------

Proposed supervisor during this period:

Name	<input type="text"/>	Phone	<input type="text"/>
------	----------------------	-------	----------------------

**Section B: Permanent change**

Please indicate which supervisor(s) will no longer be assigned to this project and briefly outline the reasons for changing supervision.

Name

Proposed new supervisor(s)

Name

Phone

Name

Phone

Have the new supervisors completed a 'Supervisor Nomination' form? Yes No

Approval by Associate Head of School

Name

Signature

Date