**Change of Research Name Form**

**Date:**

**Student ID#:**

**Student's Name:**

**Department:**

**Research Topic Name in English:**

**Research Topic Name in Hebrew:**

**Please Print, have your advisor sign it and submit it to the Graduate Studies Secretary in your department.**

**Advisor's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Graduate Studies Coordinator/Vice Dean: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**