

## The Irwin and Joan Jacobs Graduate School

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**Graduation Procedures Office** 

## **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: