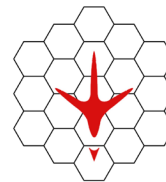




University of Puerto Rico  
Río Piedras Campus  
College of Natural Sciences  
Department of Chemistry  
17 Ave. Universidad STE 1701  
San Juan PR 00925-2537



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**Chemistry Graduate Program**  
**Form C4- Resignation from Research Advisor**

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student Number

Classification:  M.S.  Ph.D.

Entrance date into the CGP: \_\_\_\_\_

Advisor: \_\_\_\_\_

Project Initiation Date: \_\_\_\_\_

Resignation Effective Date: \_\_\_\_\_

Reasons:

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\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
CGP Coordinator Signature

\_\_\_\_\_  
Date