



**CHANGE OF UNDERGRADUATE
MAJOR/MINOR
OFFICE OF ADMISSIONS AND RECORDS (WH 290)**

FOR OFFICE USE ONLY

PLACE DATE STAMP HERE

STUDENT ID: _____ SIGNATURE: _____

LAST NAME: _____ FIRST NAME: _____

PHONE NUMBER: _____ EMAIL: _____

Have you applied for graduation? YES NO

If yes, term applied for graduation:
 Spring _____ Year Summer _____ Year Fall _____ Year

I wish to declare the following new:

Major: _____ *Concentration / Option (If Applicable)*

Minor: _____ *Concentration / Option (If Applicable)*

Second Major: _____ *Concentration / Option (If Applicable)*

Second Minor: _____ *Concentration / Option (If Applicable)*

PROGRAM / FACULTY MEMBER APPROVAL

MAJOR CHANGE: _____
Major Program / Faculty Member Name Major Program / Faculty Member Signature Date

MINOR CHANGE: _____
Minor Program / Faculty Member Name Minor Program / Faculty Member Signature Date

SECOND MAJOR CHANGE: _____
2nd Major Program / Faculty Member Name 2nd Major Program / Faculty Member Signature Date

SECOND MINOR CHANGE: _____
2nd Minor Program / Faculty Member Name 2nd Minor Program / Faculty Member Signature Date

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Processed By:		Date Processed:	
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