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

STUDENT ID: ___________________________ SIGNATURE: ___________________________
LAST NAME: ___________________________ FIRST NAME: ___________________________
PHONE NUMBER: ___________________________ EMAIL: ___________________________

Have you applied for graduation? □ YES □ NO

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