

CHANGE OF MAJOR / MINOR FORM

(For Undergraduate students only - Complete with Advisor/s)

Name: _____ ID # / SSN: _____
Last First Middle

Have you requested a graduation audit or applied to graduate? Yes No

If yes, indicate the anticipated graduation date: December March May June August / 20____

REQUEST A CHANGE	<input type="checkbox"/> Major: Change / Add / Remove	<input type="checkbox"/> Change Catalog Year: Core / Major / Minor
	<input type="checkbox"/> Minor: Change / Add / Remove	<input type="checkbox"/> Change Advisor
	<input type="checkbox"/> Concentration: Change / Add / Remove	

Current Primary Major Major: _____ Concentration: _____
(Always needed) Catalog Year: _____

NEW Primary Major	Major: _____	Concentration: _____
	Catalog Year: _____	

Current Secondary Major Major: _____ Concentration: _____
Catalog Year: _____

NEW Secondary Major	Major: _____	Concentration: _____
	Catalog Year: _____	

Current Minors Minor 1: _____ Minor 2: _____
Catalog Year: _____ Catalog Year: _____

NEW Minors	Minor 1: _____	Minor 2: _____
	Catalog Year: _____ Catalog Year: _____	

I wish to simultaneously complete a second degree. (Note: See Academic Catalog for additional requirements.)

Signature of Student (Note: A change fee may be added to your student account) Date

Print Name & Sign - **NEW 1st Major** Advisor (Current Advisor if only changing catalog) Date

Print Name & Sign - **NEW 2nd Major** Advisor (Current Advisor if only changing catalog) Date

Print Name & Sign - **NEW Minor** Advisor (Current Advisor if only changing catalog) Date

Office Use Only	Initial/date: _____	Fee entered: _____	Date emailed: _____
	Previous Advisor(s) notified: _____ Applied for: Audit/Graduation: _____		