



CHANGE OF MAJOR

Please Print

Student ID #: _____ Date of Birth: _____

Name: _____
Last First MI

Major(s) to Remove from my record:

- Degree Certificate (Please circle one)

Name of Major: _____

- Degree Certificate (Please circle one)

Name of Major: _____

- Degree Certificate (Please circle one)

Name of Major: _____

Major(s) to Add to my record:

- Degree Certificate (Please circle one)

Name of Major: _____

- Degree Certificate (Please circle one)

Name of Major: _____

- Degree Certificate (Please circle one)

Name of Major: _____

Catalog Year: _____ (Please note that if you do not choose a catalog year, the current academic year will be used.)

Student signature: _____ **Date:** _____

For Office Use Only:

Is student currently enrolled? YES _____ NO _____ (Yes will not be processed until semester ends)

Received By: _____ Date: _____ Processed By: _____ Date: _____