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CHANGE OF MAJOR

NAME:	STUDENT ID:			
PHONE:		EM	AIL:	
LEVEL: UNDERG	GRADUATE:		GRADUATE:	
Student Signature:			Date:	
Current Major:			Current	Catalog Year:
Current Concentration:				-
Current Minor/s:				_
New Major:			New Cata	alog Year:
New Concentration:				_
New Minor/s:				_
Departmental Signature:	(Director/Chair/Adv	visor Dean as app	Date	::
GPA:	Credits Earn	ed:	Verified by	
Office Use Only:				
Processed by:	Date:	Admit Status:	_	Student Type:

Distribution: Office of Enrollment Services, Student