CHANGE OF MAJOR

Name: __________________________ Student ID#: __________________________

☐ Declaring a Major  For Undeclared Students
Must have the new Department Chair’s signature

☐ Change of Major  For Students changing Major
Must have the new Department Chair’s signature

☐ Transferring Concentration  For Students changing Concentrations within their Major
Must have the Department Chair’s signature

☐ Upgrade Catalog Year  For students who would like to be on the current years catalog

New Major: ____________________________________________________________

The student named above has transferred into the _______________________________ department
with a concentration in _______________________________, effective as of the _______ semester.

His/Her previous Major/Concentration was: _________________________________.

Based on a review of the student’s Academic Evaluation (Degree Audit), the following credits have been awarded.

Prior Department Courses fulfills the requirements for New Department Course

________________________________________________________________________

Student Signature/Date Department Chairperson Signature/Date

New Faculty Mentor Name is: __________________________ Entered in Colleague ☐