

Undergraduate Curriculum Change Form

ID Number	LAST	FIRST	MI	CLASS (eg. Freshman, Sophe	omore, etc)	GPA	MAJOR(s)
Academic Ca	talog and am aware tha	Date: Date: Declare Concentration I wish to declare a minor in: I wish to drop my minor in: (no signature required) I wish to drop my minor in: (no signature required) Chair/Director's Approval DVISOR - To be completed by Chair/Director. Please list the student's the chair, director, faculty member or any combination:					
Student Signa	ture:			Date:			
<u>De</u>	clare/Change Major	<u>(s)</u>	Declare/Change	e Minors(s)		<u>Declar</u>	e Concentration
I no longer w I would like r	o change my major rish to my major to be: my major to be: o declare a second major	I wi	sh to drop my minor uired)	in: (no signature		ach concent	ration to major:
Form" wh		n: To be completed by				Off	icial Use Only
advisor(s)	- whether it be the chair	, director, faculty me	mber or any combin	ation:		Change	effective semester: