



Change in Major/Minor Form

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(Print Clearly) (First, M.I., Last)

Class Year: _____

Current Major(s):

Are You Dropping This Major?

- Yes • No
- Yes • No
- Yes • No
- Yes • No

New Majors(s) to Add:

Current Minor(s):

Are You Dropping This Minor?

- Yes • No
- Yes • No
- Yes • No
- Yes • No

New Minors(s) to Add:

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

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Anticipated Completion Date: _____

