

Change of Curriculum Form

Major, Minor, Concentration/Emphasis Declaration

Student Information

Student ID#

Last Name

First Name

Middle Name

☐ Yes ☐ No
Division Athlete?

Current Program (Signatures Required)

	College	Degree (ex. BS, BA, etc.)	Major/Minor	Concentration/Emphasis	Advisor Signature	Date
1:						
2:						
3:						

Complete Desired Program (Signatures Required)

	Program	Chair Signature	Date	Advisor Assignment	Dean or Designee Signature	Date
Primary Major/Degree:						
Secondary Major/Degree:						
Minor 1:						
Minor 2:						
Concentration/Emphasis :						
Other:						

Student Signature

Date

See Reverse for Instructions

For office use only

Credits Earned GPA Effective Term Matric

Double Major? ☐
Double Degree? ☐

Official Initials
College Verification

Date Entered Entered