

COLLEGE OF ENGINEERING CHANGE OF MAJOR FORM

COMPLETE THIS SECTION IN FULL

Date: _____

CUID#: _____

Student Name: _____ **Expected Degree Date:** _____

Local Address: _____ **Local Phone #:** _____

_____ **E-mail Address:** _____

(The previous major will be notified by the Engineering Registrar's Office)

New Major: _____ **Previous Major:** _____

New Advisor (Please Print): _____ **Advisor Code:** _____

Previous Advisor (Please Print): _____

New Major Approval: _____
(Signature of Major Coordinator)

Date Approved: _____

**Please return completed form to
New Major's Dept. Office**