



**CHANGE OF MAJOR FORM**  
**Division of Academic Affairs**

Name: \_\_\_\_\_ Classification: \_\_\_\_\_

Semester: \_\_\_\_\_

I wish to change my major from \_\_\_\_\_ to \_\_\_\_\_

because \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
 Signature of Student \_\_\_\_\_ Date \_\_\_\_\_

***(CURRENT DEPARTMENT)***

\_\_\_\_\_  
 Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Departmental Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

***(NEW DEPARTMENT)***

\_\_\_\_\_  
 Departmental Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Dean Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Provost/Vice Chancellor for Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_

<b><i>To be completed by New Departmental Chair</i></b>	
New Advisor: _____	_____