



## \*Undergraduate Major/Minor Declaration Request & Advisor Designation

**Students with 60+ credits towards degree completion are encouraged to obtain financial aid status before submitting this request.**

Student Name: \_\_\_\_\_

ID: \_\_\_\_\_

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

Term: \_\_\_\_\_

Date: \_\_\_\_\_

Phone: \_\_\_\_\_

### A. Major: Declaration Change *If updating advisor only, skip to Part D.* Drop

Students should seek advisement prior to requesting a change of major, concentration and/or track as it could result in an increase in the number of credits required for graduation. If a student changes a major, concentration and/or track, the requirements are those specified in the catalog in effect at the time the student becomes a degree candidate in the new major, concentration and/or track. Please contact the respective department for written approval from an advisor: **If this is a request for a Double Major please check here**

College of Arts, Science & Education

College of Business

College of Behavioral & Social Sciences

College of Health Profession: \_\_ School of Allied Health

\_\_ School of Nursing

New Major: \_\_\_\_\_ Chairperson Signature \_\_\_\_\_

Current Major: \_\_\_\_\_ Chairperson Signature \_\_\_\_\_

### B. Minor/Concentration/Track: Declaration Change Drop

Students must earn at least 24 credits with a 2.0 cumulative GPA to declare a minor. Completing a minor is optional, and students should seek the guidance of an academic adviser when selecting a minor to understand how the minor requirements may be completed in conjunction with their degree. Please contact the respective department for written approval from an advisor: **If this is a request for a Double Minor please check here**

College of Arts, Science & Education

College of Business

College of Behavioral & Social Sciences

College of Health Profession: \_\_ School of Allied Health

\_\_ School of Nursing

New Minor: \_\_\_\_\_ New Concentration/Track: \_\_\_\_\_ Chairperson Signature \_\_\_\_\_

Current Minor: \_\_\_\_\_ Current Concentration/Track: \_\_\_\_\_ Chairperson Signature \_\_\_\_\_

### C. Other Designations

#### Certification Declaration

Certificate Plan: \_\_\_\_\_ Chairperson Signature \_\_\_\_\_

### D. Advisor Designation: New Update **Student signature not required for departmental updates.**

Assigned Advisor: \_\_\_\_\_

*Please Print*

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Academic departments and students should retain a copy of this form for your records prior to submission.**

Processed by: \_\_\_\_\_

Date: \_\_\_\_\_

Revised May 2020

**\*ATTN Athletes: Athletic advisor must verify & initial** \_\_\_\_\_