



Change in Major/Minor Form

Student's Name: _____
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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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