

**COLLEGE OF SCIENCE
CHANGE OF MAJOR/DEGREE PLAN**

NAME _____ DATE _____

SID NO. _____ LOCAL TELEPHONE NO. _____

GPA _____ EMAIL ADDRESS _____

****Only enter *NEW* information/changes to your degree plan****

New information for primary degree program:

COLLEGE _____ DEGREE: BS _____ BA _____ BSC _____
MAJOR 1 _____ Opt. _____ MAJOR 2 _____ Opt. _____
MINOR 1 _____ MINOR 2 _____
CATALOG _____

Advisor's approval _____
Signature

New information for secondary degree program:

COLLEGE _____ DEGREE: BS _____ BA _____ BSC _____
MAJOR 1 _____ Opt. _____ MAJOR 2 _____ Opt. _____
MINOR 1 _____ MINOR 2 _____
CATALOG _____

Advisor's approval _____
Signature

The change is effective: Fall _____ Spring _____ SSI _____ SSII _____

Student's signature _____

Return signed and completed form to your College advising office, Gould Simpson 934

IMPORTANT: *If you have applied for your degree check, you **MUST** advise Graduation Services, Administration Building, room 313 of any change in your degree program.*

For Office Use ONLY

Semesters entered: _____

APPROVED: _____ DENIED: _____ Advisor's signature _____