## 81,9(56,7< 2) 6287+ \$/\$% 3HWLWLRQ IRU &KDQJH RI \*I

NAME (Please Print) TO BE C		OMPLETED BY STUDENT		STUDENT NUMBER
			,	J00
Last	First	Middle		
Complete Parts I and II to declare or c	hange Program*, Major*,	Concentration(s).		
PART I I am currently enrolled in:		PART II I wish to declare/change to:		
College				
Program		Program		
Major		Major		
Attribute (if applicable)		Attribute (if applicable)		
Concentration 1 (if applicable)		Concentration 1 (if applicable)		
Concentration 2 (if applicable)		Concentration 2 (if applicable)		
Student Signature			Date	
	TO BE COMPLE			
Department Chair Signature			Date	
Graduate Dean Signature			Date	
STUDENT ID J00	Effective Term	n	Catalog Term	
MAJOR CODES				
COLLEGE PROGRAM	MAJOR	ATTRIBUTE (if applicable)	CONCENTRATION 1 (if applicable)	CONCENTRATION 2 (if applicable)
PRIMARY ADVISOR		\$'9,625ID J00		
changing programs	from one college to a I Sciences changing	another, a new a	· •	ge. If a student is ns must be completed. her must complete a new
	REGIST	TRAR'S OFFICE US	E	
Updated By	Date	Degree Anal	yst	Date
				Rev 03/20