

Major Code _____

Major Field of Concentration

Recorded _____

Copies Sent _____

Date _____

Student Name _____ ID _____ Extension _____ Drawer # _____

Planned Date of Graduation: May _____ December _____

Major Field of Concentration _____ Division _____
(40 hours required beyond division)

Please check the appropriate item:

___ Filing your major for the first time ___ Interdepartmental _____ Division _____
(20 hours required beyond division)

___ Changing your Major ___ Double Major* _____ Division _____
(in 1 division) (40 hours required beyond division)

___ Updating your Major ___ Double Major* _____ Division _____
(in 2 division) (20 hours required beyond declared division)

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Courses in Field of Concentration

Core courses must be taken by all majors

Have Taken				Will Take			
Crs #	Course Title	Sem	Year	Crs #	Course Title	Sem	Year

ALL UPPERLEVEL COURSES WILL BE USED TO DETERMINE COLLEGE AND DEPARMENTAL HONORS

** Course Exemptions from AP _____ ** To be filled in by faculty only!

Indicate arrangements for the comprehensive exams here (MUST BE COMPLETED) _____

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This student is hereby approved for pursuance of a field of concentration in accordance to the above plans.

Major Field Adviser _____ ** Date _____

IMPROTANT** If this is not your official adviser of record, you must also file a change of adviser from available in the Registrar's Office**

Please Note: If this is an *Interdepartmental major*, you must obtain the signature of both department heads involved.
Please indicate what arrangements have been made for your comprehensive exams _____

Department Head Signature/Date

Department Head Signature/Date

If this is a double major, you must complete a separate form for each department and obtain approval from each department.

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Student's Signature/Date REQUIRED

Registrar's Signature/Date