

REQUEST FOR CHANGE OF MAJOR, MINOR OR CONCENTRATION

| Last Name | First Name | MI |
|--|----------------------------------|------------|
| ID# | Classification | Athlete |
| FROM | ТО | |
| Major | Major | |
| Concentration(If Applicable) | Concentration(If Applicable) | |
| Minor(If Applicable) | Minor(If Applicable) | |
| Remove Concentration(If Applicable) | Add Concentration(If Applicable) | |
| Remove Minor(If Applicable) | Add Minor(If Applicable) | |
| Signature of Student: | Date: | |
| APPROVED | APPROVED | |
| Signature Department Chair from which Transfer is being made Date | Signature | being made |
| Signature | Date | |
| Athletics Department If Applicable Date | Signature | |
| Signature Department Chair of Minor being removed If different from major department Date | Date | |
| FOR OFFICE USE ONLY | I | |

Recorded: _____ Date:____