

CHANGE OF MAJOR

(or Minor, Concentration, Specialization, Track, Cluster)

_____	_____	_____
Last Name, First Name	ID Number	Effective Term

- INSTRUCTIONS:**
- 1 – Enter only information that you wish to add or remove.
 - 2 – Consult with, and obtain the signature of, your advisor.
 - 3 – Submit signed form to the One-Stop Student Services Center (Levermore Hall, Room 8)

ADD the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster
ADD the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster
ADD the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster
REMOVE the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster
REMOVE the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster
REMOVE the following: <input type="checkbox"/> 1 st Major <input type="checkbox"/> 2 nd Major <input type="checkbox"/> 3 rd Major <input type="checkbox"/> Minor <input type="checkbox"/> Concentration <input type="checkbox"/> Specialization <input type="checkbox"/> Track <input type="checkbox"/> Cluster

Add 5-Year Program _____ <i>(complete this section only if you are joining at 5-Year, 4+1, or 3+2 Program)</i>	Signature of Program Representative _____
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Change Site to _____ <i>(complete this section only if you are changing campus locations)</i>
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Change Catalog Term from _____ to _____ <i>(complete this section only if you are changing your catalog term)</i>

_____	_____
Student Signature	Date
_____	_____
Current Advisor Signature	Date
_____	_____
Dean/Chair/Program Director	Date

- ← Signature from current advisor is needed if you are adding an additional major; adding a minor; adding or changing a concentration, specialization, track, or cluster; or changing your site or catalog term
- ← Signature from dean, chair, or program director is needed if you are adding or changing major, adding a minor from a different department or school, or changing site