

DECLARATION OF MAJOR

NAME: _____ ID.# _____
(FIRST) (MIDDLE) (LAST)

EMAIL ADDRESS: _____ PRESENT ADVISOR: _____ GRADUATION DATE: _____
MO/YR

CHECK ONE: Change in Major _____ Additional Major _____ New Licensure _____
Change in Catalogue _____ Additional Degree _____ Drop Licensure _____

CHECK ONE DEGREE : B.A. _____ B.S. _____ B.M. _____ B.S.W. _____

FIRST MAJOR (AS STATED IN CATALOGUE) _____ CATALOGUE YEAR _____

CONCENTRATION IN MAJOR (IF APPLICABLE) _____

SIGNATURE OF STUDENT _____ Transfer student? ⁺ Yes No
Signature/Date

SIGNATURE OF MAJOR DEPARTMENT HEAD _____ /Date: _____

NAME OF MAJOR ADVISOR _____

*Attach substitution memo if appropriate.

SECOND MAJOR (AS STATED IN CATALOGUE) _____

SECOND DEGREE _____ MAJOR CONCENTRATION _____

SIGNATURE OF SECOND MAJOR/DEGREE DEPARTMENT HEAD _____ /Date: _____

NAME OF SECOND MAJOR ADVISOR _____

*Note: 124 credit hours required for first major and for additional second major
155 credit hours required for second degree

DO YOU PLAN TO OBTAIN TEACHER LICENSURE? PLEASE ANSWER: YES _____ NO _____

_____ B-K
_____ K-6
_____ 6-9 (LANGUAGE ARTS, MATHEMATICS, SCIENCE, OR SOCIAL STUDIES) CIRCLE APPROPRIATE AREA
_____ 7-12 FAMILY AND CONSUMER SCIENCES
_____ 9-12 SEE CATALOGUE FOR AREAS OFFERED
_____ K-12 (ART, DANCE, ESL, FRENCH, MUSIC, PHYSICAL EDUCATION , SPANISH, THEATRE) CIRCLE APPROPRIATE AREA

Office of the Registrar

Date Processed