

## **Program Update**

Change of Undergraduate Major/Minor/Specialization/Certificate Program/Catalog Year

Student Name:	Student ID:
Current Major(s):	
Current Minor(s), Specialization(s), Certificate Programs:	
Current catalog year:	
CATALOG YEAR (REQUIRED FIELDS)	
The catalog year determines degree completion requirements. Currer than the year that he/she started. Students returning within two semes to stay in their original year; otherwise, the catalog year in effect at the	sters of prior enrollment (excluding summer) are able
Do you wish to change your catalog year?	If yes, to what year?
<u>DELETE</u> MAJOR, MINOR, SPECIALIZATION OR CERTIFICATE PROGRAM	
Program Title:	Mark One: OMajorOMinorOSpecOCert
Program Title:	Mark One:
ADD Major, Minor, Specialization or Certificate Program	
Program Title:	Mark One: O MajorOMinorOSpecOCert
Program Title:  Program Title:  APPROVAL SIGNATURES	Mark One: O MajorOMinorOSpecO Cert
Program Title:  Program Title:	Mark One: O MajorO MinorO SpecO Cert
Program Title:  Program Title:  APPROVAL SIGNATURES	Mark One:
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:	Mark One:
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:  Current Academic Advisor:	Mark One:
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:  Current Academic Advisor:  Dean Approval (Program(s) Deleting):	Mark One:
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:  Current Academic Advisor:  Dean Approval (Program(s) Deleting):  Dean Approval (Program(s) Adding):	
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:  Current Academic Advisor:  Dean Approval (Program(s) Deleting):  Dean Approval (Program(s) Adding):  Is a change or addition of academic advisor recommended:	Mark One: O Major O Minor O Spec O Cert  Date: Date: Date: Date: Date:
Program Title:  Program Title:  APPROVAL SIGNATURES  Student Signature:  Current Academic Advisor:  Dean Approval (Program(s) Deleting):  Is a change or addition of academic advisor recommended:  Recommended Advisor:	Mark One: O Major O Minor O Spec O Cert  Date: Date: Date: Date: Date:
Program Title: Program Title: Program Title:  APPROVAL SIGNATURES  Student Signature: Current Academic Advisor: Dean Approval (Program(s) Deleting): Dean Approval (Program(s) Adding): Is a change or addition of academic advisor recommended: Recommended Advisor:  Recommended Advisor:  adding a new major, minor or certificate from within a different college than students.  For Office Use Only	Mark One: O Major O Minor O Spec O Cert  Date: Date: Date: Date: Date: