Date: __________________________

Name: __________________________________________ | Banner No. __________________________

Last | First | MI

Current classification: __________________________ Email Address: __________________________

Current major: __________________________ New major: __________________________

Concentration: __________________________ Concentration: __________________________

Current minor: __________________________ New minor: __________________________

Signed: __________________________________________

Student ______________ Date ______________

APPROVED:

______________________________ __________________________
Advisor’s Printed Name Advisor’s Signature Date

______________________________ __________________________
Department Chairperson’s Printed Name Department Chairperson’s Signature Date

☐ Please check this box, if you are a Student Athlete and list the sport you participate in.

SPORT: __________________________

Signed: __________________________________________

Athletic Enhancement Center Representative ______________ Date ______________

Rev. 02/2017