



CHANGE OF ACADEMIC PROGRAM

Student Name:					SU ID#: 9			
	Last First		Middle					
Effective Term:*					SU Box:			
*Note: If submitted after	the drop/add deadline (first	week of class),	the program cha	ınge will be eff	fective in the su	bsequent term.		
	PROGRAM IS A PAR' THE STEPS BELOW T						REER.	
 Are you a Un Are you seek If you are changed Obtain the sign Sign and return 	ticipated graduation date iversity Fellow? No Cing Teacher Certification unging departments, go to gnature of your new advisorn completed form to the	Yes (1) (1) (2) No (1) Yes your new acastor below. Con Student Recon	If Yes, obtain s s	ignature of Footain signates where a read and/or bloom 214, in Sa	ellows Advisor ture of Teacher new advisor w ck B below. mford Hall.	or below.) er Certification ill be assigned		
	IIS PORTION IF YOU ION, OR SECOND DE			GING TO A ADD		OR, MINOR, NGE TO □	degree, major, etc.? <u>Click here</u> to review a list of current codes.	
College:	Degree:	Major 1:		Conc 1:		Minor 1:		
	(Optional):	**Major 2:		Conc 2:		Minor 2:		
Second Degree (Op	otional):**							
College:	Degree:	Major 1:		Conc 1:		Minor 1:		
	(Optional):	Major 2:		Conc 2:		Minor 2:		
	Degree: (Optional):	Major 1:					.оск.	
Date:					**A <i>second degree</i> will require at least 32 additional credits and other requirements as stated in the University catalog.			
New Advisor's Signature			Oate:			approval and proc orm will be e-mai	essing, a copy of led to all interested	
University Fellows Advisor's Signature Date: Teacher Certification Officer's Signature (OBB, Rm 322) (Box Below for Student Records Office Use Only)					NOTE: As soon as the new advisor has signed the form, that advisor may be assigned to the student in Banner by the department's secretary			
	(Box Below for Student Rec	oras Office Use C	inty)		Da	ne Stamp (Office	use Uniy)	
			Date					