



It is the student's responsibility to obtain all signatures and submit this form to the Registrar's Office.

CWID: _____
Last Name First Name MI

Cell Phone: _____

New Major: _____

*Concentration: _____
**if applicable*

Please transfer the following minor(s) to new major program of study:

Department Head Signature (old major): _____ Date: _____

Department Head Signature (new major): _____ Date: _____

**New Advisor: _____
****Advisor to be assigned by New Department Head**

*NCAA Compliance Officer Signature: _____ Date: _____
**If applicable*

Student Signature: _____ Date: _____

Office Use Only

Recorded to Banner: _____
Initials Date