



## STUDENT'S REQUEST FOR A CHANGE OF MAJOR

In order to change your current major  
OR to declare a major (if you are currently listed as undecided),  
please follow these steps in the sequence listed:

1. If you are a Freshmen or Sophomore, you must obtain the signature of your current faculty advisor before proceeding further.
2. You must next obtain the signature of the Department Chairperson for your current major. (If you are currently listed as "Undecided," you may eliminate this step).
3. You must next obtain the signature of the Department Chairperson for your newly declared major.
4. Finally, you must present this form to the Associate Academic Dean who will grant final approval. The Dean's Office will assign a new academic advisor from the department of your new major and will submit this form to the Registrar's Office. You will then be able to view your new advisor's name from the *Academus On-Line* system.

*PLEASE SEE FORM ON REVERSE SIDE*



Office of the Registrar

NTTC 2<sup>nd</sup> Floor

304.243.2238

# CHANGE OF MAJOR

NAME \_\_\_\_\_ CLASS LEVEL \_\_\_\_\_

STUDENT ID# (found on Cardinal Card) \_\_\_\_\_

I wish to change my major from \_\_\_\_\_ to \_\_\_\_\_

Reason: \_\_\_\_\_

\*\*If intended major is Business Administration, you must declare a concentration in (please check one):  Management  Marketing  International Business

Student Signature: \_\_\_\_\_  
\* \* \* \* \*

## REQUIRED APPROVALS (must be obtained in this sequential order)

### 1. Faculty Advisor (Freshmen and Sophomores only)

I approve of this student's decision to change his/her major.

\_\_\_\_\_  
Signature of Faculty Advisor

\_\_\_\_\_  
Date

### 2. Current Department Chairperson:

I approve of this student's decision to drop his/her current major.

\_\_\_\_\_  
Signature of Current Department Chairperson

\_\_\_\_\_  
Date

### 3. New Department Chairperson

I will accept this student into my department according to the following conditions:

\_\_\_\_\_  
Signature of New Department Chairperson

\_\_\_\_\_  
Date

### 4. Associate Academic Dean

I approve this student's application for a change in major with the following conditions:

\_\_\_\_\_  
Signature of Associate Academic Dean

\_\_\_\_\_  
Date

Newly Assigned Advisor: \_\_\_\_\_

PLEASE SEE REVERSE SIDE OF THIS FORM FOR INSTRUCTIONS

\_\_\_ Registrar's Office to adjust expected Graduation Date in Datatel and/or to adjust degree audit