



UNDERGRADUATE CHANGE OF FIELD OF STUDY FORM

Genisys ID: _____

Name: _____ Date: _____

Current Degree Program: _____

New Degree Program: _____

Current Major: _____

New Major: _____

Current Minor: _____

New Minor: _____

Current Concentration: _____

New Concentration: _____

Current Cognate: _____

New Cognate: _____

Reason for proposed change:

Signature of Current Advisor:

_____ Date _____

Signature of New Advisor:

_____ Date _____

Signature of Dean or designee:

_____ Date _____

Copies to Registrar, Advisor, Dean, Student

OFFICE USE ONLY:

Date Entered _____ SGASTDN _____ Staff Initials _____

If student is transferring to or from a COM/ARTS major, note date of file transfer: _____