

## **Declaration or Change of Major/Concentration Form**

Full Name:	
ID/SSN #:	
Date:	
Major Declaration: (one major per form, check the appropriate box)	
☐ First:	
□ Second:	
☐ Change – New:	
Old:	
Track/Concentration (if applicable):	
Former Advisor's Signature:	
<b>NEW</b> Advisor (first or change only, assigned by Chair):	
Comments:	
Intended Date of Graduations	