NAME _____ ID# _____ CLASS _____

Last First Initial

SIGNATURE OF STUDENT _____ DATE _____

SECTION A : MAJOR

Circle one: Declare Change Add Drop

Circle one: Single Major Double Major Combined Major

Major 1: _____ Advisor's Signature _____

Print Advisor Name _____

Chairperson's Signature _____

Major 2: _____ Advisor's Signature _____

Print Advisor Name _____

Chairperson's Signature _____

SECTION B : ADVISOR

Fill in if only changing an advisor and there are no other changes.

Print Name of Former Advisor _____

Signature of New Advisor _____ Date _____

Print New Advisor Name _____

FILL OUT SECTION A OR B AND RETURN FORM TO: Academic Advising Programs, 160 Whitman Hall

FORMER ADVISOR SHOULD SEND ADVISING FOLDER TO: Academic Advising Programs, 160 Whitman Hall