

UNDERGRADUATE REQUEST FOR CHANGE/DECLARATION OF MAJOR

Currently enrolled students may change their major (plan) with departmental approval. Note: If your request is approved, you MUST enroll only in the courses _____ complete Section B.

SECTION A (Print Clearly)

Student's Name: _____ CSUB ID: _____

E-Mail: _____ Phone Number: _____

Have you applied for Graduation: • Yes • No Anticipated Graduation Term: _____

Current Major: _____ Current Concentration: _____

• I would like to REMOVE the following course(s) _____ (i)-0.7

• I would like to ADD a minor in: _____

SECTION B

• I would like to REMOVE the following course(s) _____ 0.267 0

Program/Department Chair Authorization:

Approved CHANGE of new