

**STETSON UNIVERSITY
COLLEGE OF ARTS AND SCIENCES
Graduate Division**

Request for Change in Graduate Major

INSTRUCTIONS: This form is to be used by students who have been formally admitted to the Graduate Division. Approval for a change in major will be granted by the Graduate Committee for the department in which the student desires to major. Students should familiarize themselves with the department's requirements for a degree before requesting a change in major: the requirements in effect at the time the change of major is granted will govern the student's new program.

Name: _____ **ID# 800-** _____

Email Address: _____

Mailing Address: _____

_____ **Phone #** _____

Current Major: _____ **Advisor:** _____

Desired Major: _____

Reason for Request:

Student Signature: _____ **Date:** _____

Recommendation of Department

Approved: _____ **Denied:** _____

Comments: _____

Department Chair: _____ **Date:** _____