Cheyney University Of Pennsylvania
Cheyney, Pennsylvania 19319

DECLARATION OF MAJOR/MINOR ---CHANGE OF MAJOR/MINOR APPLICATION

Please Check Appropriate Action(s) - (Please Print)

DATED APPLICATION INITIATED: _____

DECLARATION OF MAJOR(S)_____ DECLARATION OF MINOR(S)_____

CHANGE OF MAJOR(S)_____ CHANGE OF MINOR (S) _____

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STUDENT'S NAME _____PREFIX _____
(Mr. Mrs. Ms.)

STUDENT'S ID# _____EMAIL ADDRESS_____

MAJOR:_____ MAJOR ADVISOR:_____

MINOR: _____MINOR ADVISOR:_____

DEPARTMENT ENTERING: _____

DEGREE(S): _____CONCENTRATION(S)_____

DUAL MAJORS: _____ _____

DUAL MAJOR ADVISORS: _____

Statement of understanding:

I, _____, understand **not** all credits earned to date may apply toward my graduation due to change of major/minor. I have received and reviewed the degree program requirements and a curriculum guide. Furthermore, I understand that I am responsible for successfully completing all course requirements.

_____ _____ _____ _____
Student's Signature Date Department Chair's Signature Date

_____ _____
Application processed by (Registrar's Office Personnel) Date

Distribution: **Copy** **S**tudent **Copy** = New Department **Copy** = Previous Department
Original **R**egistrar's Office for processing and system input

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