Florida International University
Office of the Registrar
Graduate Request for Change of Major

Col/Sch: _____

Major: _____

Clasf: _____

Instructions: Please complete this form and secure the approval of the admitting department.

Social Security Number: | | | | – | | | – | | | | |

Name:

_____

Current Major Name: _____ Current Major Code: | | | | |

Current College or School: _____

Requested New Major Name: _____ Requested New Major Code:

Requested New College or School: _____ | | | | |

I understand that I must adhere to and complete the academic program requirements that are in effect at the time of my admission into the new major. I also understand that I am changing my major and must meet the entrance requirements to the new program before my change of major will be approved.

Student's Signature: _____ Date: _____

This student has met all entrance requirements for the requested new college and major listed and is accepted as a graduate degree-seeking student.

_____ _____

Signature of Dean/Department Chairperson of Requested New Major Date

Distribution: White: Registrar's Office - Canary: New Department Major - Pink: Former Department Major; Goldenrold: Student.