



## Request to Change or Add a Major

### Section I.

\_\_\_\_\_  
Name PeopleSoft #

\_\_\_\_\_  
Phone # E-mail

### Request to change a major within the School of Fine Arts

\_\_\_\_\_  
Department Current Degree Current Concentration

\_\_\_\_\_  
Department Requested Degree Requested Concentration

### Consent Signatures

\_\_\_\_\_  
Student's Signature Date

\_\_\_\_\_  
Advisor's Signature Date

### Section II.

The above request is hereby approved.

\_\_\_\_\_  
Department Head's Signature Date

**Return completed form to Amanda Wilde, Director of Advising in the School of Fine Arts Dean's Office.**