



REQUEST FOR CHANGE OF COLLEGE/MAJOR/CURRICULUM

OFFICE OF ADMISSIONS AND RECORDS (M/C 018)

Instructions: Complete the top portion of this form and submit it to your college office. If approved, the requested change will be effective for the next academic term. Please **PRINT**

NAME			SOCIAL SECURITY NUMBER									REQUEST DATE		
Last			First			Middle								
Please change my college to:			<input type="checkbox"/> A + A			<input type="checkbox"/> BADM			<input type="checkbox"/> CAHP			<input type="checkbox"/> EDUC		
			<input type="checkbox"/> ENGR			<input type="checkbox"/> LAS			<input type="checkbox"/> NURS			<input type="checkbox"/> SOCW		

Please change my major to _____ Curriculum/Major Please add a second major _____ Curriculum/Major

Please add a minor _____ Minor Code:

FOR OFFICE USE ONLY

Effective Term:		<input type="checkbox"/> Fall 19 _____		<input type="checkbox"/> Spring 19 _____		<input type="checkbox"/> Summer 19 _____							
1. Change of curriculum/major		From		<input type="text"/>				To		<input type="text"/>			
2. Add a second major								To		<input type="text"/>			
3. Change college		From		<input type="text"/>				To		<input type="text"/>			
New degree sought		New expected graduation date		College approval				Date					
		MONTH / YEAR											

DISTRIBUTION White - ORR; Yellow - New College; Pink - Prior college (college changes only)
THE UNIVERSITY OF ILLINOIS AT CHICAGO