



ASBURY UNIVERSITY

OFFICE OF THE REGISTRAR

registrar@asbury.edu

MAJOR/MINOR CHANGE REQUEST UNDERGRADUATE

Please list your current major(s) and minor(s) and any changes that need to be made to your academic record. Please allow 2-4 weeks for processing. Adding a major or minor requires moving to the catalog requirements in effect at the time of the change. Requests from first semester freshmen and transfers for updates to majors/minors will be held for processing until after the completion of the first semester. Only one change to the primary major can be processed per semester.

Full Name [print]: _____ **ID#:** _____ **Class:** Freshman
 Sophomore
 Junior
 Senior

Current Major(s): _____
List all; if you intend to drop your current major(s), please indicate on major drop line.

Current Minor(s): _____

Major Change Request

Minor Change Request

Add: _____

Add: _____

Add: _____

Add: _____

Drop: _____

Drop: _____

Drop: _____

Drop: _____

Major Concentration (if applicable): _____

Requested Advisor (if applicable): _____

Expected Graduation Date: _____

I understand that I must follow the catalog requirements in effect at the time of this change.

Student Signature: _____ **Date:** _____

I have discussed or plan to discuss these changes with my advisor.

OFFICE USE ONLY

- Advisor Changed/Added, Previous Advisor _____
- Major/Minor Request entered
- Student Notified

Completed by: _____

Date: _____

Received
