Change of Program Request

UNDERGRADUATE ONLY

OFFICE OF THE REGISTRAR • ACU BOX 29141, ABILENE, TEXAS 79699-9141

INSTRUCTIONS:

1. To become effective the **same semester** as the request, forms must be received in the Registrar's Office by **5 p.m. on Friday of the first week of the semester (fall, spring)**.
2. To become effective the **following semester** as the request (spring, summer, fall), forms must be submitted to the Registrar's Office any time after **5 p.m. on Friday of the first week of the semester (fall, spring)**.
3. Signatures from both departments are required for double majors or two degrees.

TO BE COMPLETED BY STUDENT:

Name _____ Student ID No. _____

Address _____ Email _____

City _____ State _____ ZIP _____ Phone (_____) _____

Classification: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior Current major _____

Current advisor or degree plan specialist signature _____

New Program Requested:

Major _____ Concentration (track) _____ Degree _____

Second major _____ Concentration (track) _____ Degree _____

Minor _____ Second minor _____

NOTE: A double major is not the same as two degrees (degree=B.A., majors=English and History).
Students who wish to complete majors in two different degrees (e.g., B.S. and B.A., etc.) must complete at least 152 credit hours and meet all general education and major requirements for both degrees.

I plan to receive the following two degrees: Degree _____ Major _____

Degree _____ Major _____

Student signature _____ Date _____

TO BE COMPLETED BY NEW DEPARTMENT:

After the requested program change is made (see effective date above), the information below applies:
Degree catalog year _____ Expected date of graduation _____ Assigned faculty advisor(s) _____

Signatures:

Major 1		*Major 2*	
DEGREE PLAN SPECIALIST	DATE	DEGREE PLAN SPECIALIST	DATE

FOR REGISTRAR'S OFFICE USE

Program change effective for the _____ term.

Program attached to CAPP (SHADEGR) _____

Program change entered by _____ Date _____

Advisors changed by _____ Date _____