



UNC CHARLOTTE

The University of North Carolina at Charlotte
Office of the Registrar

If you are receiving **Veteran benefits**, please notify the
UNC Charlotte Veterans Service Office of all changes.

CHANGE OF MAJOR/MINOR FORM

UNDERGRADUATE STUDENTS ONLY

GRADUATE STUDENTS MUST INITIATE CHANGE OF PROGRAMS THROUGH GRADUATE ADMISSIONS

Effective Term: _____
(Specify)

(Please Print)

NAME: _____ UNC CHARLOTTE ID: 800
Last First Middle

ADVISOR'S SIGNATURE: (College of Education only) _____ DATE: _____

Seniors only: Have you applied for graduation? [] Yes [] No Cumulative GPA: _____

ADD:

DEGREE: _____ MAJOR: _____ CONCENTRATION: _____ SIGNATURE: _____
Chairperson Date

DEGREE: _____ MAJOR: _____ CONCENTRATION: _____ SIGNATURE: _____
Chairperson Date

MINOR: _____ SIGNATURE: _____ MINOR: _____ SIGNATURE: _____
Chairperson Date Chairperson Date

NOTE TO DEPARTMENTS:

Please reassign advisors as necessary.

DROP:

DEGREE: _____ MAJOR: _____ CONCENTRATION: _____ Signature not required.

DEGREE: _____ MAJOR: _____ CONCENTRATION: _____ Signature not required.

MINOR: _____ Signature not required.

RETURN COMPLETED FORM WITH ALL NECESSARY SIGNATURES TO THE OFFICE OF THE REGISTRAR.