REQUEST FOR DOUBLE MAJOR

Student ____________________________                  Date __________________
Stu. ID# ____________________________  #Credits to date __________
GPA __________
I am requesting to pursue a double major in:

___________________________________     __________________________________
* first major                                                         * second major
*Be sure to include Concentration if needed

Catalogue year_______________________
I understand that criteria for earning a double major includes:
  1. Completing all course requirements for both majors
  2. 20 course credits in the second major may not overlap with major requirements in the first major.

SIGNATURES
Student ____________________________                  Date: __________________
First Major:  Dept. Head _______________________           Date: __________________
Second Major:  Dept. Head _____________________          Date: __________________
First Major: School Dean _______________________          Date: __________________
Second Major: School Dean ____________________           Date: __________________
Provost ____________________________________  Date: __________________
First Advisor__________________________________
Second Advisor_______________________________

Office of the Registrar
8/10/07 alg