



ONLINE PROGRAMS

# LAMAR UNIVERSITY

## Change of Major Form

Today's Date: \_\_\_\_\_

**Student Information:** Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

### PLEASE FILL OUT THE SECTION BELOW:

#### Change of Major:

Change Major Information: approvals will be obtained by Advisory staff

Current Major: \_\_\_\_\_ New Major: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approval from current department chair: \_\_\_\_\_ Date: \_\_\_\_\_

Approval from new department chair: \_\_\_\_\_ Date: \_\_\_\_\_

All changes are subject to verification and approval. Please submit the completed form to your advisor. Please be sure to include all necessary information on the form. Keep a copy of this form and email for your records. Your authorization is acknowledged through electronic submission. Policy and procedure information is available at <http://degree.lamar.edu>.