

OAKLAND UNIVERSITY
CHANGE OF MAJOR/MINOR REQUEST FORM

_____ Date received in
New major office
_____ Initials of recipient

To make changes to your major/minor or additional major:

- 1. Complete Section I below. (College guest, post-baccalaureate, and other special students may not declare a major or minor using this form.)
- 2. Submit the form to the advising office of your new major/minor for processing and approval.
- 3. *The catalog you follow for graduation requirements cannot be more than six years old at the time of graduation.
- 4. **NCAA Student Athletes are required to meet with an Athletic Adviser to change any major.

The advising office for your new major/minor will forward your request to the office of the Registrar for coding. If applicable, they will request a revised transfer credit evaluation of your transfer transcripts from Academic Records. If SAIL does not reflect the change by the start of your next semester, contact your new advising office.

SECTION I (To be completed by student)

Name: _____ Student Number G00 _____ Date: _____
Last First Middle Initial

Address: _____
Number Street City State Zip

Contact Telephone: _____ OU Email Address: _____ @oakland.edu

Year of entry to OU: _____ Semester of 1st class attended at OU: (Circle one) Fall Winter Summer

Have you already earned a bachelor degree? Yes No If so, from what university? _____

NCAA Student Athlete Yes No If so, which Sport: _____

Have you transferred credits to OU Yes No Are you a Readmit student? Yes No Readmit semester: _____
(Have you had to reapply for admission to OU?)

Current Major(s): _____ Current Minor(s): _____
(If any)

REQUESTED CHANGES TO MAJOR(S) and/or MINOR(S)

If changing major entirely, please indicate new major as primary. If adding a second major, please indicate which one is Primary and which one is Secondary. If adding a concentration, be sure to review your major to verify a concentration exists.

Add/Drop (Circle one): _____ Major/Minor (Circle one) Primary/Secondary (Circle one)

Add/Drop (Circle one): _____ Concentration (if applicable)

Add/Drop (Circle one): _____ Major/Minor (Circle one) Primary/Secondary (Circle one)

Add/Drop (Circle one): _____ Concentration (if applicable)

Add/Drop (Circle one): _____ Major/Minor (Circle one) Primary/Secondary (Circle one)

Add/Drop (Circle one): _____ Concentration (if applicable)

Add/Drop (Circle one): _____ Major/Minor (Circle one) Primary/Secondary (Circle one)

Student's Signature: _____ Date: _____

SECTION II (To be completed by new major/minor department)

APPROVED DENIED MACRAO: YES NO

New Major(s) _____ New Minor(s) _____

Reason _____ (if denied)

Effective Term _____ Student Athlete: YES NO

College Requirement Followed: Distribution Exploratory

Transfer Credit Evaluation needs to be sent to new academic unit? YES NO

**Signature of Athletic Adviser (NCAA athletes only) _____ Date _____

Signature of authorized dept/school adviser _____ Date _____

*Year of earliest Catalog student may follow _____

| | |
|-----------------------|--|
| Date Coded: _____ | Initials: _____ |
| Curriculum Code _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| Curriculum Code _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| Curriculum Code _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| Curriculum Code _____ | <input type="checkbox"/> Add <input type="checkbox"/> Remove |