



### DOUBLE MAJOR FORM (UNDERGRADUATE)

Student Name		Academic Year	
Student ID		Semester	
Current Class		Current Academic Standing	
Cumulative GPA		Mobile Number	

CURRENT MAJOR	SECOND MAJOR
Major _____	Major _____
College _____	College _____

OFFICIAL USE ONLY			
Chair/Associate Chair of the current major		Chair/Associate Chair of the second major	
<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected	<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected
Comments:		Comments:	
(Name) Chair/Associate Chair of the current major:		(Name) Chair/Associate Chair of the second major :	
Signature:	Date:	Signature:	Date:

College Dean of the current/second major:	
(Name) College Dean of the current/second major:	Comments:
Signature:	
Date:	

ENROLLMENT & REGISTRATION OFFICE USE ONLY		
<input type="checkbox"/> Approved	<input type="checkbox"/> Did not meet requirements	<input type="checkbox"/> Hold
(Name) Dean of Student Affairs / Manager of Admission & Registration:	Signature:	Date:
Comments:		
Processed by (registration officer):	Effective Term:	Date:

- To be used by Undergraduate Students only.
- To be submitted to the Office of the Registrar at least two weeks before the registration time of the affected semester.
- To be eligible for double major, a student must meet the requirements for admission to the new major & other requirements listed in the policy.

- Please return the Form to the Registrar's Office along with approved study plan from the Chair/Associate Chair of the second major



