

COLUMBUS STATE UNIVERSITY

Request to Change Undergraduate Program

Instructions: This form must be completed to initiate a change of major and must be approved by an authorized official in the school or department offering the requested program. The completed form should be sent to the Registrar's Office. After one week for processing, **the student may view an updated degree evaluation report in ISIS.** Course substitutions and waivers approved for the current major may not apply to the new major.

To be Completed by the Student (Please Print)

Student's Name	CSU ID Number	Date
FROM: Current Major Program:	_____	
TO: Major Program Requested:	_____	
Minor Program Requested:	_____	
Double Major Program Requested:	_____	
Student Signature:	_____	

To be Completed by Authorized School or Department Official

New Major/Degree Assigned:	_____ / _____	
	Degree Major Program	
Catalog Year: _____	Signature of School Official	Date

Registrar's Office Use Only

DEGREE CODE: _____	MAJOR CODE _____	MINOR CODE: _____
Processing Date: _____	Initials _____	