



College Engineering and Applied Science
CHANGE OF MAJOR REQUEST FORM

Date: _____

Name _____ UCID# M_____

Local Address _____

Telephone _____ Email _____

Change Major
From: _____ To: _____

Quarter/ Effective: _____

Approved By _____ Date: _____

COMMENTS _____

**Return form to: Anne Hoehn, Assistant Dean
Student Services, 115 Administration Building**

COPY TO:

- Student
- Professional Practice Office
- File
- Major Change Processed

Verification Checklist/Date

- _____
- _____
- _____
- _____