



# Major Declaration Form

Name \_\_\_\_\_ ID# \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Major \_\_\_\_\_ Degree (B.A., B.S., B.B.A. etc.) \_\_\_\_\_

Specialization (if applicable) \_\_\_\_\_

Completed major admission/declaration requirements (check your catalog)

Cumulative GPA \_\_\_\_\_ Subset GPA (if applicable) \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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## Office Use Only:

- BBA Scholar
- Meadows Scholar
- Pre-Med
- Other \_\_\_\_\_

## Special Notes:

\_\_\_\_\_  
Academic Advisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director/Assistant Director of University Advising Signature

\_\_\_\_\_  
Date