

DOUBLE MAJOR REQUEST FORM

Name _____ Class _____ ID # _____

Major A		Major B	
Prerequisites:		Prerequisites:	
Major Courses	Term	Major Courses	Term

Signature of Student _____ Date _____

We, the student named above and the approved representatives for the departments or programs concerned, certify that each of the majors approved is appropriate and complete in itself and that no course is counted toward more than one major. It is understood that one or more courses may be part of one major and prerequisite to another, or may be prerequisite to more than one major. Without the need for any approval the student may choose to complete only one major. If the student chooses to complete only one major he/she must notify the Registrar's Office.

Major Advisor Signatures:
 Major A _____ Date _____

Major B _____ Date _____

***This completed form must be returned to the Registrar's Office,
 4 McNutt in order to have more than one major recorded.***