



Application for Change of Major

I hereby announce my intent to change my academic program. I wish to change my major:

From: _____

To: _____

Check if you are declaring HuMed Track (English, History, or Liberal Studies majors only)

I understand the implications of this change and agree to fulfill all of the requirements of the new major, including the University Core requirements, as described by the Department Chair and/or published in the College Documents as of this date.

Note: Any student attempting to change their major to one within the Westbrook College of Health Professions will need to complete an additional process. Please contact the appropriate Department Chair for further information on this process.

Student's Name: _____
(Please Print)

Student's Signature: _____ Date: _____

Personal Ref # (PRN): _____ Campus: Biddeford or Portland

Email Address: _____ Class of: _____

Phone Number: _____

Please check with your new advisor/department chair/program director regarding any special immunization requirements.

New Major _____ Approved _____ Disapproved _____

Department Chair/Program Director Signature: _____ Date: _____

Name of New Assigned Advisor: _____
(Please Print)

Current Advisor Signature: _____ Date: _____

**Please forward all necessary advising paperwork to the new Department and/or Advisor.*

For Office Use Only:	
If HuMed, add attribute _____	Update Grad Year _____
Updated By: _____	Date _____

REGISTRAR'S OFFICE
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