

## **Declaration of Major**

hereby declare	as my major program of study.
I understand the implications of this change and agree to fulfill all of the requirements of the major, including the University core requirements, as described by the Department Chair and/or published in the College documents as of this date.	
Please check with your new advisor/department chair/program director regarding any special immunization requirements.	
Note: All students applying to the COM 3-4 program or the CHP 3-2 PA program must make an appointment with a UNE Admissions representative, and must obtain Admissions representative's signature:	
Student's Name:	Date:
Personal Reference #:	Campus: Biddeford Portland
Email Address:	Class of
Student's Signature:	Date:
Current Major:	
Department Chair/Program Director Signature:	Date:
Declared Major Approved Disapproved	
Assigned Advisor (Name):	Date:
For Office Use Only: Update Checklist Update Gra Updated By: Date	

## REGISTRAR'S OFFICE