

**BREVARD COLLEGE
DECLARATION/CHANGE OF MAJOR FORM**

Return completed form to the Office of the Registrar, 105 Beam Administration Building

Name: _____ BCID#: _____

Last First Middle

NEW MAJOR:
Degree: BA BS
Major: _____

Concentration/Emphasis 1 (if applicable)

Concentration/Emphasis 2 (if applicable)

Catalog Year _____
Read and answer the following question (if applicable).
1. Are you a student athlete? Yes No
 If Yes, student must obtain the signature of the
 Director of Compliance:

Director of Compliance Date _____

CHANGE OF MAJOR:
Current Major: _____

Concentration/Emphasis 1 (if applicable)

Concentration/Emphasis 2 (if applicable)
CHANGE OF MAJOR: Degree: BA BS
Change to: _____

Concentration/Emphasis 1 (if applicable)

Concentration/Emphasis 2 (if applicable)
1. Are you a student athlete? Yes No
 If Yes, student must obtain the signature of the Director of
 Compliance:

Director of Compliance Date _____

Current Advisor Name: _____ Date: ____/____/____

Division Chair (New Major) Signature: _____ Date: ____/____/____

Assigned Advisor in Major Field: _____

Declaration of Second Major:

Second Major (within same degree): Student must complete all requirements for the major and understand that only 12 credits can be duplicated between the majors. See also specific major requirements (i.e. student cannot major in Biology and Environmental Science). A detailed program of study for both majors and authorized signatures from the Division Chair or Major Coordinator are required in order to declare a second major. Students should also review financial aid policies concerning double majors.

Second Major (see details above) _____

Division Chair or Major Coordinator for Second Major Signature _____

Second Major Concentration/Emphasis (if applicable) _____

Delete my Second Major

Declaration/Change of Minor:

_____ Is this a New or Second Minor? Delete my current Minor
Minor

Advisor Signature: _____ Date: ____/____/____

I authorize Brevard College to change my major and/or minor as noted above. By changing my major, I acknowledge that any courses earned previously may not apply towards the new major and could delay the anticipated graduation date. I also understand that if the request is made after the last day of schedule adjustment for a term, it will be processed for the next term.

_____ Date: ____/____/____

Student Signature

FOR OFFICE OF THE REGISTRAR USE ONLY: _____

Date Received

Date Processed

Initials