

# FITCHBURG STATE COLLEGE

## PETITION FOR A CHANGE OF MAJOR/CONCENTRATION AND/OR CHANGE OF ADVISOR

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

Student I.D. #: \_\_\_\_\_ Current Cum. Ave.: \_\_\_\_\_ Yr. of Grad.: \_\_\_\_\_

I request permission to change my major **from:** \_\_\_\_\_ **to:** \_\_\_\_\_  
(major) (track) (major) (track)

**or** change to a double major of: \_\_\_\_\_ **and:** \_\_\_\_\_  
(major) (track) (major) (track)

Approved: \_\_\_\_\_ Approved: \_\_\_\_\_  
(Signature of Chair of Department you are leaving) (Signature of Chair of Department you are entering)

Your new Academic Advisor(s) is/are: \_\_\_\_\_

When completed and signed by all parties concerned, return to the Registrar for processing.

Print Services REG9355 chmajor 7/04

# FITCHBURG STATE COLLEGE

## PETITION FOR A CHANGE OF MAJOR/CONCENTRATION AND/OR CHANGE OF ADVISOR

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

Student I.D. #: \_\_\_\_\_ Current Cum. Ave.: \_\_\_\_\_ Yr. of Grad.: \_\_\_\_\_

I request permission to change my major **from:** \_\_\_\_\_ **to:** \_\_\_\_\_  
(major) (track) (major) (track)

**or** change to a double major of: \_\_\_\_\_ **and:** \_\_\_\_\_  
(major) (track) (major) (track)

Approved: \_\_\_\_\_ Approved: \_\_\_\_\_  
(Signature of Chair of Department you are leaving) (Signature of Chair of Department you are entering)

Your new Academic Advisor(s) is/are: \_\_\_\_\_

When completed and signed by all parties concerned, return to the Registrar for processing.

Print Services REG9355 chmajor 7/04

# FITCHBURG STATE COLLEGE

## PETITION FOR A CHANGE OF MAJOR/CONCENTRATION AND/OR CHANGE OF ADVISOR

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

Student I.D. #: \_\_\_\_\_ Current Cum. Ave.: \_\_\_\_\_ Yr. of Grad.: \_\_\_\_\_

I request permission to change my major **from:** \_\_\_\_\_ **to:** \_\_\_\_\_  
(major) (track) (major) (track)

**or** change to a double major of: \_\_\_\_\_ **and:** \_\_\_\_\_  
(major) (track) (major) (track)

Approved: \_\_\_\_\_ Approved: \_\_\_\_\_  
(Signature of Chair of Department you are leaving) (Signature of Chair of Department you are entering)

Your new Academic Advisor(s) is/are: \_\_\_\_\_

When completed and signed by all parties concerned, return to the Registrar for processing.

Print Services REG9355 chmajor 7/04