CHANGE OF MAJOR/ADVISOR FORM

Name: ______________________________________________ Student ID: ____________________________________

Current Major: ______________________________________________

Add/Change Major (please circle one)
1: ____________________________ Minor(s): ____________________________ (Circle)
Concentration: ______________________________________________

Add/Change Major (please circle one)
2: ____________________________ Minor(s): ____________________________ (Circle)
Concentration: ______________________________________________

Current Advisor: ____________________________ New Advisor: ____________________________

Student's Signature: ___________________________________________ Date: ____________________________

*This form must be submitted to the Academic Records Office by email at academicrecords@opsu.edu, by fax at 580.349.1371 or in person in Sewell-Loofbourow 128.

Office Use Only

First Catalog Term: ______
Processed by: _________
Date: _______________