

Major Declaration Form

To add, delete, or change a major, minor, concentration, or certificate to a student's academic program of study.

Original: send to Registrar Office, SSB CPO 58.
Copy: office entering advisor assignment in Banner should retain a copy.



EASTERN KENTUCKY UNIVERSITY
Serving Kentuckians Since 1906
Office of the Registrar

REG. OFFICE USE ONLY
SSB CPO 58, PHONE: 859-622-2320
FAX: 859-622-8031

Change processed:

Date processed: _____

Processed by: _____

Effective term: _____ EKU student ID: _____

Student name (please print): _____

Student current phone contact (**REQUIRED**): _____ email: _____

Student signature (**REQUIRED**): _____ Date: _____

STUDENT: please indicate below the entire program of study you wish your record to reflect, be sure to list all majors, minors, etc., that you now desire!

Primary Curriculum

- 1st Major - Intended DEGREE, (please circle one): AA AAS AS ASN BA BBA BS BSN
- MAJOR Subject Area, (for the above designated degree): _____
- Minor Subject Area, (if applicable): _____
- Concentration/Specialty (if applicable): _____
- Pre-Professional curriculum (if applicable): _____
- Other: _____
- Other: _____

Secondary Curriculum

- 2nd Major (if applicable - give degree and subject): _____
- Other: _____
- _____

AUTHORIZING SIGNATURE: Provide signature below if desired by department, or required by program. I have consulted with this student and approve the above declared program of study. Based upon my authority, and the student's permission designated by their signature, please change their official academic record to reflect the declared program indicated above.

Printed Name of Authorized Individual Signature of Authorized Individual Date

ADVISOR: IF an advisor assignment is also being requested please list name and ID below.

Advisor printed name: _____ Advisor ID: _____

Data entry: Check a box below to indicate that the requested advisor has been entered into Banner, by which office and staff, and date of data entry.

Dept. _____ College _____ Advising Office | Data entry staff initials: _____ Date: _____
Dept. name College name