

College of Arts and Sciences

CHANGE OF MAJOR REQUEST FORM

Name: _____ Date: _____
ID No: _____ Phone: _____
Email: _____ Catalog Year: _____
Current GPA: _____ (Academic year student came to UD.)

MINIMUM GPA FOR GOOD ACADEMIC STANDING

After 1st & 2nd semester, at least 1.7 After 4th semester, at least 1.9
After 3rd semester, at least 1.8 After 5th semester, at least 2.0

Are you on academic probation?
Yes No
(If yes, please contact the Dean's Office for instructions before completing this form.)

INTERNAL TRANSFER POLICY
Any undergraduate student having completed **one academic semester in good standing** at the University of Dayton may initiate a request for Internal Transfer. The student desiring to change his/her major/minor can initiate this process by contacting the advisor in their new major and/or the advisor in their new minor and submitting a formal transfer application to the department. It is strongly believed that a student's chances for long term success is improved when any change of major is delayed until they have had time to transition to college and successfully complete a semester of work.

TO BE COMPLETED BY STUDENT & DEPARTMENT

New advisor must be assigned in Banner/INB (SGAADVR)

NOTES:

CAS <i>College</i>	SBA <i>Business</i>	SEHS <i>Teacher Education/HSS</i>	SOE <i>Engineering</i>
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Current 1st Major
Advisor Name

New 1st Major
Advisor Name

Current 2nd Major
Advisor Name

New 2nd Major
Advisor Name

Minor
Advisor Name

INTERNATIONAL STUDENTS
International students sponsored by their governments: If you are sponsored by your government, you must obtain permission from your Embassy to initiate a change of major. By signing this form, you are verifying that you have both communicated with and obtained approval of your change of major from your Embassy. All international students: After changing your major, inform International Student & Scholar Services Office by visiting their office. You will obtain an updated I-20 that reflects the change.

Student Signature: _____ Date: _____

Department Chairperson Signature: _____ Date: _____

Dean's Office Only:	Approved	Not Approved
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Assistant Dean Signature: _____ Date: _____

Send by campus mail to:
Office of the Dean • O'Reilly Hall • +0800