

SOUTHERN METHODIST UNIVERSITY

Student Change of Degree Program Request

Name: _____ SMU ID: _____

Mailing Address: _____

Phone: _____ SMU Email: _____

Current Major(s)/ Minor(s): _____

I AM REQUESTING THE FOLLOWING CHANGE TO MY RECORDS:
 (Please check each applicable box)

DUAL/TRANS SCHOOL MAJOR DECLARATION/ CHANGE MINOR DECLARATION/ CHANGE
 Please complete SECTION A Please complete SECTION B Please complete SECTION C on back of form

ALL STUDENT ATHLETES OR INTERNATIONAL STUDENTS MUST COMPLETE SECTION D OF THIS FORM

SECTION A: DUAL/TRANS SCHOOL

Understanding that I must complete all remaining requirements for my primary school/major/degree, I request approval to add the following program in another school of the University.

PRIMARY SCHOOL: _____ PRIMARY MAJOR/DEGREE: _____

SECONDARY SCHOOL: _____ SECONDARY MAJOR/DEGREE: _____

I understand that I must complete all additional General Education/School/Major/Degree requirements for this new program.

_____ ANTICIPATED GRADUATION DATE: _____

Student Signature

NOTE: A current exploratory Degree Progress Report detailing the requirements for General Education, and the proposed second school/major/degree must be attached to this form.

ENDORSEMENTS:

	Approved	Not Approved	Date
Second School Dean's Representative:			

SECTION B: MAJOR DECLARATION/ CHANGE

I wish to **ADD** the following major(s):

MAJOR: _____ DEGREE: _____ CATALOG YEAR: _____

MAJOR: _____ DEGREE: _____ CATALOG YEAR: _____

I wish to **DELETE** the following major(s):

MAJOR: _____ DEGREE: _____ CATALOG YEAR: _____

MAJOR: _____ DEGREE: _____ CATALOG YEAR: _____

_____ Anticipated Graduation Date: _____

Student Signature

ENDORSEMENTS:

	Approved	Not Approved	Date
Advisor's Signature if applicable:			
Departmental Approval if applicable:			

