



Student Name _____ ID # _____

Student Signature _____ Date _____

First Major: _____
9-12 Teacher Licensure: Y N PK-12 Teacher Licensure: Y N

Second Major: _____
9-12 Teacher Licensure: Y N PK-12 Teacher Licensure: Y N

Third Major: _____
9-12 Teacher Licensure: Y N PK-12 Teacher Licensure: Y N

Note: If you have declared an Accounting or Chemistry major, please also indicate degree you will be pursuing:
Select one: Bachelor of Arts Bachelor of Science

First Minor: _____

Second Minor: _____

DROP MAJOR / MINOR

Major(s) to be dropped: _____ Expected Graduation Date: _____
Month / Year

Minor(s) to be dropped: _____