

MAJOR / MINOR / CERTIFICATE REQUEST FORM

Name: _____ I.D. #: _____

Cell Phone #: _____ E-mail Address: _____

Current School/College _____ Classification: FR SO JR SR

University Honors Program: ___ Yes ___ No Expected Graduation: _____

I WANT TO <u>REQUEST</u>	I WANT TO <u>DROP</u>
MAJOR: _____ Indicate: ___ BA ___ BS ___ Primary ___ Secondary ___ Tertiary Track/ Concentration: _____ MINOR: _____ CERTIFICATE: _____	MAJOR: _____ Indicate: ___ BA ___ BS ___ Primary ___ Secondary ___ Tertiary Track/ Concentration: _____ MINOR: _____ CERTIFICATE: _____

NOTE: For official acceptance: Music majors must audition. Studio Art majors must submit a portfolio.

Student Signature: _____ Date: _____

Academic Advisor Signature: _____ Date: _____

Advisor Instructions: Complete all information requested. Forward to College of Arts and Sciences, 218 Verhaegen Hall.

FOR CAS USE ONLY: Date Received: _____ CUM GPA: _____ Date sent to Academic Department: _____

<u>FOR ACADEMIC DEPARTMENT USE ONLY:</u>		<input type="checkbox"/> Accepted	<input type="checkbox"/> Not Accepted
Music Major Audition Completed: ___ Yes ___ No	Studio Art Portfolio Submitted: ___ Yes ___ No		
Chair/Coordinator: _____	Date: _____		
Mentor Assigned: _____	Academic Dept/Program: _____		
Comments: _____			
DEPARTMENT INSTRUCTIONS: <ul style="list-style-type: none"> Confirm Concentration or Track for major, if applicable. Add or remove faculty mentor in Banner (SGAADVR). Do not indicate mentor as primary advisor. Do not use the 'End Advisor' option. Scan and forward completed form to College of Arts of Sciences at artssci@slu.edu within two weeks of receiving the form. Keep copy for department records, if applicable. 			