



UNDERGRADUATE CHANGE OF MAJOR OUTSIDE OF CAS

NAME: _____ USF ID: _____

LOCAL PHONE: _____ EMAIL ADDRESS: _____

CURRENT MAJOR/COLLEGE: _____ Concentration: _____

Use this form to drop your declared major in the College of Arts and Sciences.

Check the College below in which you intend to pursue a major

<input type="checkbox"/> Business, BSN 2102	<input type="checkbox"/> Nursing or Pre-Nursing, MDN1004
<input type="checkbox"/> Pre-Education, DAC 107	<input type="checkbox"/> Transitional Advising Center (TRAC), SVC2011
<input type="checkbox"/> Engineering, ENC 1302	<input type="checkbox"/> Undergraduate Studies, SVC2002
<input type="checkbox"/> Medicine – Pre Athletic Training	<input type="checkbox"/> Visual & Performing Arts, FAH120

(Student Signature) DATE: _____

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FOR OFFICE USE ONLY: CURRENTLY ENROLLED: Y N DATE: _____ TRANSFER HOURS: _____

CHANGE FROM : _____ CHANGE TO: _____