

UNIVERSITY OF NEW HAVEN
UNDERGRADUATE DIVISION - REQUEST FOR ADDITIONAL MAJOR

DATE ____/____/____ STUDENT IDENTIFICATION # ____/____/____

NAME _____
LAST FIRST M.I.

ADDRESS _____

TELEPHONE _____

CURRENT MAJOR (check one): _____ A.S. _____ B.A. _____ B.S.

** CURRENT WORKSHEET ATTACHED _____
Program Name

ADDITIONAL MAJOR (check one): _____ A.S. _____ B.A. _____ B.S.

** CURRENT WORKSHEET OF NEW PROGRAM
MUST BE COMPLETED AND SUBMITTED WITH
THIS FORM

Program Name

Department Authorization/Chairperson Signature Date

** THE DEPARTMENT MUST ASSIGN AN ADVISOR. _____
THIS IS MANDATORY. Advisor Name

Remarks/Conditions: _____

PLEASE SUBMIT COMPLETED FORM WITH WORKSHEET TO UNDERGRADUATE RECORDS. THANK YOU.