



**Office of the  
University Registrar**  
 25 University Avenue, West Chester, PA 19383  
 Ph: 610-436-3541 Fx: 610-436-2370  
[www.wcupa.edu/registrar](http://www.wcupa.edu/registrar)

WCU ID# \_\_\_\_\_  
 Required

**APPLICATION FOR CHANGE OF MAJOR  
 UNDERGRADUATE STUDENTS**

*Instructions:* Please complete all information on the form and obtain ALL appropriate signatures. Once complete, return to the Registrar's Office for processing. Plan codes must be obtained from Department Chairpersons. Forms without plan codes will be returned to the department.

**Student Name:** \_\_\_\_\_

Anticipated Graduation Term: \_\_\_\_\_

CURRENT MAJOR : \_\_\_\_\_ PLAN: \_\_\_\_\_

DESIRED MAJOR (to be added): \_\_\_\_\_ PLAN: \_\_\_\_\_

NEW ADVISOR: \_\_\_\_\_

**CURRENT ADVISOR:**

Comments: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**CHAIRPERSON of DEPARTMENT (in which student seeks admission):**

Comments: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**CHAIRPERSON of DEPARTMENT (from which student is transferring):**

Comments: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Student's signature/Date (required):** \_\_\_\_\_

<b><u>Office Use Only</u></b>	
Processed by: _____	Date: _____