

CHANGE OF CURRICULUM

curriculumchange@siu.edu

DAWG TAG # Student Name:	
otadon Name.	
Required to Process Form	If you are changing the catalog year, indicate here:
Apply to Term:	Catalog Year:
YYYYSS (SS: 20 = Spring, 40 = Summer, 60 = Fall)	YYYYSS (SS: 20 = Spring, 40 = Summer, 60 = Fall)
Primary Program (Priority #1) College:	Degree: (AAS, BA, BS, BFA, etc.)
Major 1: with Sp	ecialization: and
Major 2: with Sp	ecialization: and
Minor 1:	pecializations must correspond to approved Majors and effective terms
Minor 2:	reclanzations must correspond to approved imajors and effective terms
Secondary Program (Priority #2) College:	Degree: (AAS, BA, BS, BFA, etc.)
Major 1: with Spe	ecialization: and
Major 2: with Spe	ecialization: and
Minor 1:	a cialization and the constant of Nations and effective towns
Minor 2: NOTE: Specializations must correspond to approved Majors and effective terms	
Student is a candidate for graduation (changes will be applied to SHADEGR as well) Student is approved for the Capstone Option (XCAP code will be added to student record)	
Comments	
Student Signature:	Date:
If student signature cannot be obtained, email from student's university email address authorizing change must be attached	
Advisor Name: (Printed)	Email:
Advisor Signature:	Date:
College Signature:	Date:
Registrar's Office Use Only Processed By: Date: Date:	