

**FLORIDA AGRICULTURAL AND MECHANICAL UNIVERSITY**

**CHANGE OF MAJOR FORM**

<b>Student's Name Printed</b>			<b>Student ID # (Required) (Please do not list SS#)</b>								
Last	First	MI									
<b>Change From</b>			<b>Change To</b>								
Old Major _____			New Major _____								
Old Major Code _____		Current _____ G.P.A.	New Major Code _____					_____ Approved**			_____ Denied*
Student Signature		Date									
Advisor or Department Chairperson		Date									
Athletics		Date	Dean					Date			
Dean		Date									

\*If the change of major is denied, please indicate the reason(s): \_\_\_\_\_

\*\*The change of major has been approved, and the file should now be forwarded to the new department.