



Petition for Change of Major

Undergraduate

Student Information: AUA ID: _____

Full Name: _____
Last Name First Name Middle Name

Cell Phone: _____ Home Phone: _____

AUA E-mail: _____

Semester/Term: _____ Year: _____

Last Name

Current Degree Goal and Major: Credits completed: _____ Cumulative GPA: _____

First Semester Enrolled: _____ Expected Graduation Date: _____

First Name

I request a change of major From: _____ To: _____

To Be Effective Starting: Fall 20-- Spring 20--

Reason for Request: _____

I understand that, should my Petition be approved, I may be required to pay a difference in tuition.
I also understand that a positive decision on my Petition may result in adjustments to my tuition assistance.
Should my Petition be approved, I am hereby obliged to pay _____ AMD in tuition difference.
I will pay this sum by _____.

AUA ID

Student Signature Date: _____

Required Approvals/Signatures: Date: _____

| | | | |
|----------|--------|---------------------------------|-------|
| Approved | Denied | Present Academic Advisor: _____ | _____ |
| Approved | Denied | Present Program Chair: _____ | _____ |
| Approved | Denied | New Academic Advisor: _____ | _____ |
| Approved | Denied | New Program Chair: _____ | _____ |

For Office Use Only

Registrar Signature Date