

Students who complete and submit this form for processing are requesting to change their currently declared major and/or type of program (i.e., degree/certificate). The student must complete the information as requested below and submit the completed form to the Registrar's Office.

A student may change a major <u>once</u> prior to the first day of classes for the current term. Any changes made after the first class day (limited to two requests each semester) will be effective the following term unless an administrative change is required.

Check this box if the student is under the advisement of the Center for Student Success (0-15 earned college credit hours).

| Name: | | | SUSLA ID# | | |
|---|---|---|---|---|--|
| Address: | | | | | |
| | Street Address | | City | ST Zip | |
| Classification: Freshman SUSLA Skymail (Email): | | (Email <u>):</u> | | @sus.edu | |
| Special | Sophomore Anticipated Grad | uation Dat | e: | | |
| Are you currently seeking a degree or certificate from SUSLA? 🗌 Yes 🗌 No | | | | | |
| Are you: (check all that apply and secure the appropriate signatures) | receiving federal financial aid? | - | Financial Aic | l Advisor's Signature | |
| | receiving Veterans' benefits? | an International student? | | International Admissions Advisor's Signature | |
| | a student athlete? a non-degree seeking student? | | VA Certifying Official's Signature Athletic Director's Signature | | |
| | | | Admissions Staff Member's signature | | |
| CURRENT Ma | ajor: | NEW Ma | jor: | | |
| Academic Advisor: | | Academic Advisor: | | | |
| Advisor's Signature: | | Advisor's Signature: | | | |
| Division Dean's Signature: | | Division Dean's Signature: | | | |
| Effective Date: | Year Semester 🗌 Fa | all | Spring | Summer | |
| degree red ✓ Changing benefits. ✓ Changing ✓ If you hav | understand that: my major will update my catalog of record, w quirements of my new major and extend the tir my major may affect my Satisfactory Academ my major may result in non-transferability of ve questions about your financial aid eligibility C. Barnes Administration Building, Room A-5. | ne required to nic Progress (S credits not req , see a financi | complete degree requi AP) calculations, finan uired in the new majo | rements. ncial aid eligibility and veterans r (program of study). | |
| Student's Signa | ture/Date: | | | Registrar's Office Use Only | |

DOB _____ Phone: (3050 Martin Luther King, Jr. Drive Shreveport, Louisiana 71107 www.susla.edu

Phone: (318) 670-9229 FAX: (318) 670-6344 registraroffice@susla.edu

| ingistian's office ese only |
|-----------------------------|
| Effective Term: |
| Date Processed: |
| Processed by: |

RO: Petition to Change Major: Revised 07/14:10/14:07/16/:07/17/10/18:08/19-LR :01/23-DLW