DECLARATION OR CHANGE OF ACADEMIC MAJOR/MINOR

(Choose One)

☐ DECLARATION OF MAJOR/MINOR  ☐ CHANGE OF MAJOR/MINOR

Student’s Name: ______________________________________  MCID# ________________________________
(First Name, MI, Last Name) (Morehouse College ID# - NO SSN#'s)

Valid Email Address: ___________________________________  Telephone #: ____________________________

For DECLARATION of Major/Minor Only
(It is the student’s responsibility to obtain course/degree requirements from the major/minor department chairperson or delegated academic advisor)

Entry Term:  ☐ FALL  ☐ SPRING  Year: ______________________

Academic Major to be declared: __________________________________  Concentration (if applicable): ______________________

Assigned Academic Advisor: ______________________________  Academic Minor to be declared: ______________________

Student’s Signature: ______________________________  Date: ______________________

Department Chairperson Signature: ______________________  Date: ______________________

For CHANGE of Major/Minor
(It is the student’s responsibility to obtain remaining course/degree requirements from the major/minor department chairperson or delegated academic advisor)

I am changing my Academic Major from: ______________________ TO ______________________
Concentration (if applicable): ______________________

I am changing my Academic Minor from: ______________________ TO ______________________

Newly Assigned Academic Advisor: ______________________

Student’s Signature: ______________________________  Date: ______________________

New Department Chairperson Signature: ______________________  Date: ______________________

For ORR Use Only

Processed by: ______________________________________  Date: ______________________