CHANGE OF DEGREE PROGRAM

Completed forms need to be returned to the Registrar’s Office for processing. Change of programs can only be completed between semesters, beginning after grade posting through the last day of the add/drop period. Forms returned after add/drop will not be accepted nor processed until the next semester.

Name __________________________ ID# ___________________ CBU Email ___________________@cbu.edu

Have you filed an “Intent to Graduate Application”?  □ Yes  □ No

Status:  □ Freshman  □ Sophomore  □ Junior  □ Senior  □ Graduate

CURRENT PROGRAM  □ DAY  □ CAPS  □ MASTERS

Major(s) __________________________ Concentration(s) __________________________ Minor(s) __________________________

Current Advisor __________________________

Do you receive VA benefits? ______ Yes ______ No

You must see your VA advisor to complete the appropriate paperwork.

Are you a student athlete? ________________ Are you an International Student? __________________________

NEW PROGRAM  □ DAY  □ EVENING

(Please indicate add or delete above major, minor or concentration)

<table>
<thead>
<tr>
<th>Change to</th>
<th>Add</th>
<th>Delete</th>
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<tbody>
<tr>
<td>MAJOR(S)</td>
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<tr>
<td>MINOR</td>
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<tr>
<td>CONCENTRATION</td>
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Continuously enrolled students may graduate under the catalog in effect when they entered Christian Brothers University or any subsequent catalog. Any student who has not attended CBU for one academic year or longer will be placed under the degree requirements and academic regulations listed in the catalog of year of re-entry. Any prior work, whether transfer or CBU credits, may be re-evaluated. A student may not change program in the middle of a semester unless the student is just beginning or returning to the University.

Do you want to update your catalog year?  □ No  □ Yes  If yes, update to what year? ____________

Requested Advisor __________________________

Have you spoken to an advisor about this change?  □ Yes  □ No

I hereby request the above change(s) of advisor/major/minor/concentration be made.

Student Signature __________________________ Date __________________________

This form may be approved by the following: current Advisor, new Advisor, Department Chair of new major, Career Services Counselor, Academic Services Representative or Dean of CAPS.

Signature of Approval __________________________ Date __________________________

OFFICE USE ONLY: Entered in Banner _________________ Verified Changes in DW _________________

Emailed Student, Advisor, Athletics, International & Veteran’s Affairs (as applicable) __________________________

Revised 5/5/15