

## Request to Change or Add a Major

Please bring the form to the Music Department Office with Section I completed.

Name		Beaution for the
Name		PeopleSoft #
Phone #	E-mail	
Request to chang	ge a major within the Departi	ment of Music:
Music		
Department	Current Degree	Current Concentration
Music		
Department	Requested Degree	Requested Concentration
Department	Requested Degree	Requested Concentration
Department	Requested Degree	Requested Concentration
Consent Signatu	res	
Student's Signate	ure	Date
Applied Instructo	r's Signature (If switching to Pe	erformance) Date
Advisor's Signatu	ure	Date
Section II.		
The above reques	et is hereby approved.	
Donartmont Hoa	d'a Signatura	Data

Return completed form to Amanda Wilde, Director of Advising, in the School of Fine Arts Dean's Office.