

Please type or print using dark ink.

 Name (last, first, middle):

 Hamline ID:

 Hamline Email:

 Phone:

Student Signature: _____

 Date:

- ▶ Flexible curriculum majors/minors must be declared using the Flexible Curriculum Proposal form available at www.hamline.edu/registrar/forms.
- ▶ To change the advisor for an area of study you have already declared, select the area of study below, print the advisor's name, indicate that she/he is a new advisor, and obtain their signature.
- ▶ Return completed form to Student Administrative Services, East Hall 113.

 Anticipated Graduation Term: Fall Winter Spring Summer Year: _____

 Have you already submitted your graduation application? Yes No

 Bulletin Year: You must follow the major requirements as of the Bulletin year you choose. Unless otherwise indicated, this will default to the year you started at Hamline. For requirements, go to www.hamline.edu/ugrequirements.

MY CURRENT PROGRAM:

Primary Major: <input type="radio"/> no change <input type="radio"/> drop	First Minor: <input type="radio"/> no change <input type="radio"/> drop	Certificate: <input type="radio"/> no change <input type="radio"/> drop
_____	_____	_____
Additional Major: <input type="radio"/> no change <input type="radio"/> drop	Additional Minor: <input type="radio"/> no change <input type="radio"/> drop	Special Program: <input type="radio"/> no change <input type="radio"/> drop
_____	_____	_____

I AM DECLARING OR ADDING:

<input type="checkbox"/> PRIMARY MAJOR <input type="radio"/> BA <input type="radio"/> BBA <input type="radio"/> BFA <input type="radio"/> BS This will be listed as your first major on all academic records. Major (and concentration, if applicable): <input type="text"/>	Advisor: New? <input type="radio"/> Yes <input type="radio"/> No <input type="text"/> Department/Program Chair signature (required) _____ Advisor signature (required) _____
<input type="checkbox"/> ADDITIONAL MAJOR <input type="radio"/> BA <input type="radio"/> BBA <input type="radio"/> BFA <input type="radio"/> BS Major (and concentration, if applicable): <input type="text"/>	Advisor: New? <input type="radio"/> Yes <input type="radio"/> No <input type="text"/> Department/Program Chair signature (required) _____ Advisor Signature (required) _____
<input type="checkbox"/> EDUCATION CO-MAJOR <input type="radio"/> Elementary <input type="radio"/> Secondary <input type="radio"/> K-12 Content area (if applicable): <input type="text"/>	Advisor: New? <input type="radio"/> Yes <input type="radio"/> No <input type="text"/> Department/Program Chair signature (required) _____ Advisor Signature (required) _____
<input type="checkbox"/> MINOR <input type="checkbox"/> CERTIFICATE Area of study: <input type="text"/>	Advisor (education & 3-3 minors only): <input type="text"/> Department/Program Chair signature (required) _____ Advisor Signature (education & 3-3 minors only) _____
<input type="checkbox"/> MINOR <input type="checkbox"/> CERTIFICATE Area of study: <input type="text"/>	Advisor (education & 3-3 minors only): <input type="text"/> Department/Program Chair signature (required) _____ Advisor Signature (education & 3-3 minors only) _____
SPECIAL PROGRAM/CONCENTRATION: <input type="checkbox"/> PEACE OFFICER STANDARDS and TRAINING (POST) <input type="checkbox"/> PRE-MEDICAL	
Department/Program Chair signature (required) _____	