

Office of the Registrar

UNDERGRADUATE STUDENTS

STUDENT INFORMATION (please print in ink)

Name _____

Classification _____

Address _____

Student Identification Number _____

Telephone _____

CURRENT PRIMARY GOAL: _____

NEW PRIMARY GOAL: _____

Signature of student _____

Date _____

CHAIRPERSON OF DEPARTMENT STUDENT IS ENTERING

I acknowledge the student above as admitted to my department.

(If the student has not written the primary goal correctly above, please indicate below how it should appear on the transcript.)

ACADEMIC ADVISOR WILL BE: _____

Signature of Chairperson _____

CHAIRPERSON OF DEPARTMENT STUDENT IS LEAVING

The student above has indicated to me an intention to withdraw from my department. I will inform the student's academic advisor of this decision. I will send the student's folder to the Office of Retention and Advising so that it may be forwarded to his/her new department.

Signature of Chairperson _____

CHAIRPERSON OF UNDERGRADUATE EDUCATION DEPARTMENT

(Required of those entering an education program in a department outside the undergraduate education department itself.)

I verify that the student above meets all requirements for admission to an education program.

Signature of Chairperson of Undergraduate Education _____