



San José State
UNIVERSITY

◆ Office of the Registrar ◆ One Washington Square ◆ San José, CA 95192-0009 ◆

UNDERGRADUATE CHANGE OF MAJOR or MINOR

Please Print Clearly.

SJSU ID Number: _____

Student Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email address: _____

Term change of
major is effective:

Fall _____

Spring _____

Check one:

Bachelor

Bachelor of Arts

Bachelor of Science

New Major Objective: _____

New minor Objective: _____

Department Chairperson Signature

(Approval for new major)

Date

Department Chairperson Signature

(Approval for new minor)

Date

For Office Use Only:

Date Changed: _____ By: _____

Revised 02/06