REQUEST FOR DUAL MAJOR/DEGREE  
(Undergraduate)  

Instructions: 1. Student must schedule an appointment with the Advisor for the additional major/degree to review the requirements for graduation and to declare a dual major/degree.  
2. Advisor for the additional major/degree will update Banner and forward a copy of the form to the Advisor for the primary major/degree. If necessary, a copy will be sent to the International Services Office and/or Athletics Coordinator.  
3. Request for Dual Major/Degree form will be filed in the student’s advising file(s).  

Please Print:  
Name: ___________________________ UIN: ___________________  
Email Address: ___________________________ Phone: ___________________  
Are you an International student (F visa)? Yes_____ No_____ (Student must contact the International Services Office.)  
Are you a Student Athlete? Yes_____ No_____ (Student must contact the Athletics Coordinator)  

Primary College: (circle) Arts & Sciences Business  
Education Engineering  
Health Professions & Social Work  

Secondary College: (circle) Arts & Sciences Business  
Education Engineering  
Health Professions & Social Work  

Primary Major: ___________________________ Secondary Major: ___________________________  
Concentration: (if applicable) _______________ Concentration: (if applicable) _______________  
Catalog Year: ___________________________ Catalog Year: ___________________________  

Minor: ___________________________ (Students interested in adding a new minor must meet with the appropriate college. If pursuing Dual Major/Degree, a maximum of one minor can be declared)  

I acknowledge that the addition of a dual major/degree may result in an excess hours surcharge. Initials: _______  
Student’s Signature: ___________________________ Date: ___________________________  

FOR OFFICIAL USE ONLY  
Effective Term/Year__________________ Catalog Year__________________  

Changes to major or catalog year must be entered only in the student’s current term or in the next subsequent term.  

Receiving College Advisor’s Signature ___________________________ Date  
Entered into Banner: ___________________________ Initials: ___________________________ Comment: ___________________________  

Revised 3/2015