



SAINT MICHAEL'S COLLEGE
 Office of the Registrar
 One Winooski Park
 Colchester, Vermont 05439
 Telephone: (802) 654-2571
 Fax: (802) 654-2690

ELEMENTARY/SECONDARY EDUCATION REQUEST FOR ADDITION/CHANGE OF MAJOR/ADVISOR

(Please use this form if you have declared or are declaring Elementary or Secondary Education and wish to make any additions or changes to your majors or advisors.)

Student Name: _____

Date: _____

Student ID #: _____

Graduation Year: _____

CURRENT MAJORS AND ADVISORS

<p><u>My Current Major(s) Is/Are:</u> 1. _____</p> <p style="margin-left: 40px;">Advisor(s): 1. _____ Print Name</p> <p style="margin-left: 40px;">Advisor(s) Signature(s): 1. _____</p> <p>I am (✓ Box): <input type="checkbox"/> Dropping <input type="checkbox"/> Keeping this Major.</p> <p>I am (✓ Box): <input type="checkbox"/> Dropping <input type="checkbox"/> Keeping this Advisor.</p>	<p>2. _____</p> <p>2. _____ Print Name</p> <p>2. _____</p> <p><input type="checkbox"/> Dropping <input type="checkbox"/> Keeping this Major.</p> <p><input type="checkbox"/> Dropping <input type="checkbox"/> Keeping this Advisor</p>
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ADD A MAJOR

<p><u>I Am Adding The Following Major(s):</u> 1. _____</p> <p style="margin-left: 40px;">Department Chair: 1. _____ Print Name</p> <p style="margin-left: 40px;">Department Chair Signature(s): 1. _____</p>	<p>2. _____</p> <p>2. _____ Print Name</p> <p>2. _____</p>
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ADD AN ADVISOR

<p><u>I Am Adding the Following Advisor(s):</u> 1. _____ Print Name</p> <p style="margin-left: 40px;">Advisor(s) Signatures: 1. _____</p>	<p>2. _____ Print Name</p> <p>2. _____</p>
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PLEASE RETURN COMPLETED FORM TO THE REGISTRAR'S OFFICE (FOUNDERS ROOM 112).