

New Degree / Change of Degree Form

STUDENT INFORMATION

First Name _____ Middle Initial _____ Last Name _____
 Date of Birth _____ Telephone _____ Email _____
 Current Mailing Address _____
 City _____ State _____ Zip Code _____

ENROLLMENT INFORMATION

What semester did you begin attendance at McNally Smith College?
 Fall Spring Summer Year _____

What is your current major? _____

What is your current degree? Bachelor AAS Diploma

NEW DEGREE / CHANGE OF DEGREE INFORMATION

New Intended Degree: Bachelor AAS Diploma Masters

<p>New Intended Program/Major (Please check only one):</p> <ul style="list-style-type: none"> <input type="radio"/> Bass <input type="radio"/> Brass & Woodwinds <input type="radio"/> Guitar <input type="radio"/> Keyboards <input type="radio"/> Percussion <input type="radio"/> Strings <input type="radio"/> Voice 	<p>New Intended Minor (if applicable):</p> <ul style="list-style-type: none"> <input type="radio"/> Bass <input type="radio"/> Brass & Woodwinds <input type="radio"/> Guitar <input type="radio"/> Keyboards <input type="radio"/> Percussion <input type="radio"/> Strings <input type="radio"/> Voice <input type="radio"/> Production <input type="radio"/> Live Sound <input type="radio"/> Music Business <input type="radio"/> Composition & Songwriting <input type="radio"/> Hip-Hop Studies
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Change effective: Term _____ Date _____

In signing this form, I certify that all information provided is complete and true to the best of my knowledge.

Signature of Student _____ Date _____

Signature of Former Dept Head _____ Date _____

Signature of New Dept Head _____ Date _____

Advisor Assignment (Internal Use Only) _____