

## DECLARATION OF MAJOR/MINOR/CONCENTRATION FACULTY OF SCIENCE

|         |               |                  |
|---------|---------------|------------------|
| Surname | Given Name(s) | Student<br><br>A |
|---------|---------------|------------------|

### INSTRUCTIONS FOR DECLARING A MAJOR/MINOR/CONCENTRATION

This form is to be signed by the Chairperson/Subject Area Representative/Director of the academic unit in which you are declaring your major/minor/concentration. The Service Centre will **NOT** accept any forms without the appropriate signature(s).

Please indicate whether this major/minor/concentration will be replacing an existing one. This will expedite the processing of your request.

Once the form has been completed and signed, please return to the Service Centre.

**\*\*THE SERVICE CENTRE WILL COMMUNICATE WITH YOU REGARDING ANY PROBLEMS WITH YOUR APPLICATION USING THE ADDRESS, TELEPHONE, AND EMAIL PROVIDED ON SELF SERVICE. PLEASE ENSURE YOUR CONTACT INFORMATION IS UP TO DATE**

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| <b>BACHELOR OF SCIENCE (4 Years- 120 credit hours)</b>                                    |   |
| 1. _____<br>Major   | _____<br>Signature of Academic Representative |
| 2. _____<br>Second Major (optional)   | _____<br>Signature of Academic Representative |
| 3. _____<br>Minor (optional)  | _____<br>Signature of Academic Representative |
| <b>BACHELOR OF SCIENCE (3 YEARS- 90 credit hours)<br/>General ( With a Concentration)</b> |   |
| 1. _____<br>Concentration   | _____<br>Signature of Academic Representative |

I have reviewed and understand the requirements for this academic programme(s) as outlined in the *Academic Calendar*.

### DROPPING AN ALREADY DECLARED MAJOR/MINOR/CONCENTRATION

I wish to drop\* \_\_\_\_\_ as a \_\_\_\_\_  
(SUBJECT) (MAJOR/MINOR/CONCENTRATION)

\*The signature of an Academic Representative is **NOT** required for dropping a major/minor/concentration.

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| <b>IT IS THE STUDENT'S RESPONSIBILITY TO RETURN THIS FORM WITH THE APPROPRIATE SIGNATURES TO THE SERVICE CENTRE</b> |
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Date: \_\_\_\_\_ Student's Signature: \_\_\_\_\_

#### FOR SERVICE CENTRE USE ONLY

Date Received \_\_\_\_\_ Received By \_\_\_\_\_ Computer Updated \_\_\_\_\_