MAJOR/MINOR DECLARATION WORKSHEET
(Please PRINT legibly and fill in all blanks)

STUDENT NAME: _______________________________________

W Number: W__________________________________________

ADDRESS: ______________________________________________

________________________________________________________________________
City State Zip

TELEPHONE (HOME/WORK/CELL):______________________________

EMAIL ADDRESS: (Optional) _______________________________

PROGRAM: (CHECK Bachelor of Science (BS)/Bachelor of Arts (BA)
SOCIAL WORK MAJOR ____ BS ____BA
SOCIAL WORK ALTERNATIVE MINOR _______
GERONTOLOGY MINOR ___________

DOUBLE MAJOR: YES__ NO__ Completed AS degree? Yes __ No __

CATALOG YEAR: ___________________________________________

(PPM 4-2 must be semester changed major in)

What is your MINOR? (Required for BS degree)________________________

Remarks: ____________________________________________________

________________________________________________________________________

Please return completed form to the Social Work/Gerontology office.

Office Use only: Date Input_____ Initials_____