



UNDERGRADUATE DECLARATION OF MAJOR(S)/ MINORS(S)

Date: _____

Name: _____

Student ID# _____

Signature: _____

Phone Number: _____

A. EXPECTED GRADUATION DATE

DECEMBER MAY AUGUST YEAR: _____

B. DECLARE ALL MAJOR(S) AND/ OR MINOR(S)

State all majors/ minors in the fields of study which you plan to complete — **IN PRIORITY ORDER**

Majors/ Minors not listed will be removed from your record.

1st Major: _____ concentration: _____

2nd Major: _____ concentration: _____

1st Minor: _____ concentration: _____

2nd Minor: _____ concentration: _____

Other (credentials or certificates) if any: _____

C. APPROVAL BY APPROPRIATE DEPARTMENT CHAIR/PROGRAM DIRECTOR

1st Major: **Approved by**

New Advisor (print): _____ **Signature:** _____

2nd Major: **Approved by**

New Advisor (print): _____ **Signature:** _____

D. After all signatures have been obtained, return the form:

In person: Herzstein Enrollment Services Center

By Mail: Enrollment Services 3800 Montrose Blvd. Houston, TX 77006

By Email: registrar@stthom.edu (from your stthom.edu account)

OFFICE USE ONLY