## Lincoln Memorial University DECLARATION OF MAJOR BACCALAUREATE OR ASSOCIATE DEGREE PROGRAMS

Complete the upper portion of the form and leave with the Chair of the appropriate Academic Department in which you are declaring a major. The Chair will assign an advisor and return this form to the Registrar's Office for computer entry.

TO BE COMPLETED	BY THE STUDENT:		
Name:		ID N	0.:
Last	First	MI	
Local Mailing Addres	s:		
Declared Baccalaurea	te or Associate major: _	(May indicate "UNDECII	DED")
Anticipated date of gr	aduation:		
(You must use a catalog for	a semester in which you wer	re enrolled as a degree seeking stud must be within six years of the dat	dent at LMU. You cannot mix
If "UNDECIDED", p	ease indicate subject an	rea of particular interest:	
Declared Baccalaurea	te Minor (optional):		
If this form represents previously assigned ac	-	n, please indicate the replac	ced program(s) and
Student's Sign	nature		Date
TO BE COMPLETE	O BY ADMINISTRAT	IVE PERSONNEL:	
Assigned Academic A	Advisor:		
Office location:	Acade	emic Department:	
		•	
Signature of School Dean			Date