

DECLARATION OF MAJOR Graduate or Professional Programs

Students should complete this form and return to the appropriate graduate department to obtain needed signatures. Once signatures are obtained, the form should be submitted to the Registrar's office.

TO BE COMPLETE	ED BY THE STUDENT:			
Name: First		ID:		
Last	First	MI		
Current Graduate or Professional Major:		New Graduate or Professional Major:		
Anticipated date of graduation:		Catalog Year:		
	ar cannot be before the academic year professional program catalog.	r they were enrolled as a degree seek	sing student at LMU and must be within the	
Student's Signature			Date	
Program Director or Dean's Signature			Date 08/14	
-	Graduate o his form and return to the appropriate	RATION OF MAJOR r Professional Programs graduate department to obtain neede submitted to the Registrar's office.	ed signatures. Once signatures are obtained, the	
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Last	First	MI	110.	
Current Graduate or Professional Major:		New Graduate or P	New Graduate or Professional Major:	
Anticipated date of graduation:		Catalog Year:	Catalog Year:	
	ar cannot be before the academic yea or professional program catalog.	r they were enrolled as a degree seek	sing student at LMU and must be within the	
Student's Signature			Date	

Program Director or Dean's Signature

Date