Date: _____________________  Student ID: _____________________

Last Name: _____________________  First Name: _____________________  M.I.: ___

Day Time Phone: _____________________  Email: _____________________

---

## Declaration / Change of:
**Program (School) – Plan (Major) – Subplan (Concentration) – Minor**

I wish to officially **declare** my program as:

<table>
<thead>
<tr>
<th>Program</th>
<th>Plan</th>
<th>Subplan</th>
<th>Minor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Declaration Effective Date: _____________________  Effective Term (semester & year): _____________________

Current Chairperson’s Signature: _____________________  New Chairperson’s Signature: _____________________

*Both Signatures are required before form can be processed.*

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*I hereby authorize Bowie State University to update my records to reflect the above change.*

Student’s Signature: _____________________  Date: _________________

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Revised 02/13