

Franklin College of Arts and Sciences

The University of Georgia

To change, add, or remove a degree, major, or minor *within the Franklin College.**

Date _____

_____ Name _____

Last Four Digits of Social Security Number _____ Last _____ First _____ Mi _____

Email Address _____ Telephone Number _____

Local Address _____

Are you in the Honors Program? Yes No

_____ Student Signature

**Students wishing to change from another school/college into the Franklin College should complete the University's Change of School form.
Students wishing to change from the Franklin College to another school/college should go to the Undergraduate Studies Office in that school/college.

Complete This Area To Change, Declare, or Delete a Major Within the Franklin College	
Current (List ALL of your current majors)	Change to: (List ALL of the majors you want)
Major 1 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other	Major 1 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other
Major 2 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other	Major 2 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other
Major 3 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other	Major 3 _____ <input type="checkbox"/> AB <input type="checkbox"/> BS <input type="checkbox"/> Other

(Optional) Complete This Area Only If You Wish to Add an Area of Emphasis (Check no more than one)

<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Dentistry	<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Theology
<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Optometry	<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Medicine
<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Law	<input type="checkbox"/> Add <input type="checkbox"/> Delete Pre-Veterinary Medicine

(Optional) Complete This Area Only If You Wish To Declare or Delete a Minor**

Current School/College _____

Add Minor _____

**Departmental Approval Required _____ Date _____

Departmental Signature

Delete Minor (Departmental Approval Not Required) _____

Office Use Only

Major/Minor Change Approved: Yes No (Notes _____)

IMS and SARA updated: _____

Initials _____ Date _____