UNIVERSITY OF PIKEVILLE

CHANGE OF STUDENT ACADEMIC STATUS

ID #  First Name  Middle Name  Last Name

Academic Classification (Circle One):  Freshman  Sophomore  Junior  Senior

Name of Current Advisor

Request for Admission to a Major(s) and/or Minor(s)

Major

Check One:  ___ Bachelor of Arts  ___ Bachelor of Business Administration
            ___ Bachelor of Science  ___ Associate of Science

Minor

2nd Major

Request for Change of Major(s) and/or Minor(s)

OLD:

Major(s)/Minor

NEW:

Major

Check One:  ___ Bachelor of Arts  ___ Bachelor of Business Administration
            ___ Bachelor of Science  ___ Associate of Science

2nd Major

Minor

Student’s Signature _______________ Date _______________

OFFICE USE ONLY

NEW ADVISOR ASSIGNMENT (if applicable)

PROCESSED BY ___________________________ DATE PROCESSED ___________________________