



# Request to Declare or Change an Option/Concentration within a Major

## Student Information

Student ID #	Primary Major:
First Name	Last Name
Email @vt.edu	Cell number
Effective semester for change to occur (if left blank, the current term is applied):	

## Change in Concentration/Option

**Instructions:** To declare or change a concentration or option, please complete the section below.

<b>ADD</b>	_____ in _____	CAUS Major
	<input type="checkbox"/> Concentration <input type="checkbox"/> Option	
<b>DROP</b>	_____ in _____	CAUS Major
	<input type="checkbox"/> Concentration <input type="checkbox"/> Option	

## Signatures

Student Signature: _____	Date _____
Advisor Signature: _____	Date _____
CAUS Dean's Office Signature: _____	Date _____

**SUBMIT COMPLETED FORM TO CAUS OFFICE OF THE DEAN, 202 COWGILL HALL**