DO NOT TYPE IN THIS BOX
Bulletin #: _____ Academic Year: _____

FLORIDA INTERNATIONAL UNIVERSITY
UNDERGRADUATE PROGRAM PROPOSAL

Changes *to an Undergraduate Major*

INSTRUCTIONS: Please Type. Fill out this form **completely.**

School/College Click to select _____

Div./Dept. _____

Major Name: _____

Degree Name: _____

☐ B.A. ☐ B.S. ☐Other_____

Proposed Implementation Date: _____

PROPOSAL REQUESTED BY:

Faculty Contact _____ ____/____/20___
(Type Name) (Signature)

_____
(Email address) (Phone Number)

Chair (Dept./Div.) _____ ____/____/20___
(Type Name) (Signature)

Chair (Curr. Comm.) _____ ____/____/20___
(Type Name) (Signature)

College/School Dean _____ ____/____/20___
(Type Name) (Signature)

NO HEARING REQUIRED. PLEASE SUBMIT ORIGINAL FORM.