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2025

College of Health Sciences Undergraduate Student Change of Major

This form initiates a change to your degree/major/minor/concentration with appropriate approvals.

Instructions: Forms must be initiated by an Academic Advisor or Department. Forms are accepted following the appropriate approvals.

Sam ID Last	t Name	First Name	Date
Department of Public Health		Department of Human Sciences	
Bachelor of Arts in Biling Bachelor of Science in He Bachelor of Science in He no concentration Pre-Nursing (PNUR) Bachelor of Science in Pu	ealth Care Administration ealth Sciences,	Fashion Merchandising Interior Design Food Science and Nutrition	B.A. B.S. B.A. B.S. B.S. Only
no concentration Pre-Nursing (PNUR)		Department of Kinesiology	
		Bachelor of Science in Kinesic	ology,
Is the student a graduating So Yes No	enior?	no concentration Clinical Exercise Science (CLIN) Dcej grqt"qh"Uekgpeg"kp"J wo cp Performance and Wellness Management	
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See SHSU Online Catalog for documents/faculty/Minors+L/ 1 st Minor Academic Catalog Year: <u>Student:</u> I acknowledge that I my responsibility to know the particular discipline (degree/major/minor	will complete the minimum degree requirement /concentration). This is not a	vw.shsu.edu/dept/registrar/forms-and-d	ocuments/ cate rrently enrolled in a B.A. o n; or a post-baccalaureate.) degree. I am aware that it i l as required by my academ
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