

MARIAN UNIVERSITY
———— Indianapolis ————®
Marian's Adult Programs

Request to Change Degree, Major or Concentration

Date ____/____/____

Student ID or last four digits of SSN _____

Office Use Only:
____ Registrar
____ MAP Student File
____ Student Copy

Last Name _____ First _____ MI _____

Degree/Major/Concentration Change

Please change my degree to the option selected below.

____ Non-degree Seeking Student

____ Paralegal Certificate

____ Associate of Science in Paralegal Studies

____ Associate of Business Administration

Select one concentration for an A.B.A.

____ Management

____ Marketing

____ Human Resources Management

____ Bachelor of Business Administration

Select up to three concentrations for a B.B.A.

____ Management

____ Marketing

____ Human Resources Management

____ Finance

____ Business Technology

____ RN to BSN (Please Note: An active RN license in Indiana is required for this degree.)

I have discussed degree options with my academic advisor and agree to the changes listed above. I also understand that, after my new degree plan has been processed, I may alter my concentration selections at any time.

Student Signature _____

Date _____

Advisor Signature _____

Date _____