College of Engineering
Change of Catalog Request

Student Name: _____

First Name **M.I.** **Last Name**

ULID: C_____ **Department:** _____

Anticipated Graduation Semester/Year: _____

Current Catalog: _____

(Students follow the catalog that is in effect at the time of their enrollment or the time of their re-enrollment or change of major)

Requested Catalog: _____

Reason to Change Catalog: _____

_____

By signing this form, I understand that changing catalog may affect major, minor, concentration and/or general education requirements.

Student's Signature: _____ **Date:** _____

Approved / Not Approved:

Department Head: _____ **Date:** _____

Approved / Not Approved:

Effective Semester of Catalog Change: _____

Dean: _____ **Date:** _____

This request is to be completed by the student, approved by the student's department head and forwarded to the dean's office for approval.

Revised SU 2018