



# WALSH UNIVERSITY

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## DECLARATION OF A SECOND MAJOR

Please Print: \_\_\_\_\_  
Name (Last) (First) (Middle)

- Freshman
- Sophomore
- Junior
- Senior

Social Security Number: \_\_\_\_\_

### PRESENT CURRICULUM INFORMATION

### REQUESTED SECOND MAJOR

Degree: \_\_\_\_\_

Degree: \_\_\_\_\_

Program: \_\_\_\_\_

Program: \_\_\_\_\_

Major: \_\_\_\_\_

Second Major: \_\_\_\_\_

Minor: \_\_\_\_\_

*I have read the pertinent catalog policy on declaration of a second major. I have consulted with my major faculty advisor. I understand that the responsibility for fulfilling all requirements for majors rest with the student.*

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

Address

City/State/Zip

Mailbox Number

Telephone

### ACADEMIC DEPARTMENTAL USE ONLY

Courses for:  Second Major

**Note: One of the two declared majors will require at least 18 additional credits beyond the credits required for the other major.**

Signature of the Primary Major Department Chair \_\_\_\_\_ Date: \_\_\_\_\_

Signature of the Department Chair of requested Second Major \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN THE COMPLETED FORM TO THE OFFICE OF THE REGISTRAR FOR PROCESSING AND DISTRIBUTION**

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