

Academic Renewal Application

Part 1: Student Information

Name: U Number: Phone number: Former advisor name:					Email: Former major:							
									Former advisor email:			
									ast advis	sed by/last	contact w	ith former a
					My former advisor is aware of this Academic Renewa					cation.	Yes	No
Reason 1	for changin _ย ์	g major:										
were a re major (th Student S	esult of aca se one fron	demic mison which I ch	conduct are nanged) wil		xclusion. I unde of this application	cy and that course rstand that my adv on.	_					
CRN	Subject	Course #	Section #	Year and Term	Course Title							
							_					
Advisor N	ame:			Da	to:							
Advisor Si	gnature:			Ne	w major:							
Registra Registrar				Date	e:	U Number:						
Student			 stitution	Overall								