

**NEW STUDENT
CURRICULUM CHANGE REQUEST FORM
ADMISSIONS OFFICE
EDINBORO UNIVERSITY
EDINBORO, PA 16444**

PLEASE PRINT

Name of Student: _____

Student ID Number: _____

Original Curriculum and Concentration of Application and Acceptance were:

Requested New Curriculum and Concentration are:

Signature of Student: _____ Date: _____

DO NOT WRITE BELOW THIS LINE – ADMISSIONS OFFICE USE ONLY

Curriculum change is: _____ Approved
_____ Disapproved

Action steps: _____ Change Banner (AM)
_____ Change Folder (AM)
_____ Change Advisor (ET)

This student is a _____ FRESHMAN _____ TRANSFER

Signature of Approving Admissions Officer: _____

Date: _____

**NOTE: Please complete this form and submit it to the Admissions Office. You
will be notified in writing of the action taken in regard to your request.**