



THE NORWALK CONSERVATORY OF THE ARTS

Change of Major Request Form

Student Information:

- Full Legal Name: _____
- Student ID: _____
- Date of Birth: _____
- Email Address: _____
- Phone Number: _____

Current Major:

- Current Major: _____

Requested New Major:

- New Major: _____

Reason for Major Change:

Academic Interest Career Goals Personal Interest Other (Please Specify)

Additional Comments (Include any additional comments or explanations regarding your request)

Department Chair's Approval:

I, the undersigned Department Chair, approve the student's request to change their major.

Name: _____ Signature: _____ Date: _____

Student Acknowledgment:

I, [Student's Full Name], understand that changing my major may impact my academic plan and progress.

Student Signature: _____ *Date:* _____

Conservatory Processing:

Upon completion of this form and approval, the Conservatory Registrar's Office will update the student's major in the official records.

If you have any questions or concerns, please contact the Conservatory Registrar's Office at registrar@thenorwalkconservatory.org.