MAJOR/MINOR RELEASE FORM

Student Name: ___________________________  Student ID Number: ___________________________

Major to be Released: _____________________  Major Remaining: ___________________________

Minor to be Released: _____________________  Minor Remaining: ___________________________

Signature of Division Chair ___________________________  Date ________________

Name of Advisor (printed) ___________________________  Date ________________

Signature of Advisor ___________________________  Date ________________

Signature of Student ___________________________  Date ________________

This form must be submitted to the Office of the Registrar.

For Office Use Only:
Date Processed: ________________
Initial: ________________

Maryville College
Office of the Registrar

MAJOR/MINOR RELEASE FORM

Student Name: ___________________________  Student ID Number: ___________________________

Major to be Released: _____________________  Major Remaining: ___________________________

Minor to be Released: _____________________  Minor Remaining: ___________________________

Signature of Division Chair ___________________________  Date ________________

Name of Advisor (printed) ___________________________  Date ________________

Signature of Advisor ___________________________  Date ________________

Signature of Student ___________________________  Date ________________

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