UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS

CHANGE OF SCHOOL AND/OR MAJOR

I,,	
(Name of Student)	(Student ID Number.)
hereby request permission to chang	ge my school/major from
to	
This change is to take effect as of _	
-	(Date)
(Student's Signature)	(Date)
<u>App</u>	roval
	change must sign below before a change e of major, the Dean need only sign once. rned to the Office of the Registrar.
(Signature of Dean of Present School)	(Date)
(Signature of Dean of School to which student changing)	(Date)