Muhlenberg College

Print Name:
Berg ID:
Expected Graduation:

Field of Study Declaration

Please Print Clearly

Drop Field of Study

☐ Drop Undeclared Status

Current Advisor Signature _____ Date _____

☐ Drop Major
☐ Drop Minor

Field of Study _____ Current Advisor Signature _____ Date _____

☐ Drop Major
☐ Drop Minor

Field of Study _____ Current Advisor Signature _____ Date _____

Add Field of Study

☐ Add Major

Field of Study _____ Concentration _____ Date _____

☐ Add Minor

Department Chair Signature _____ Name of Student's New Advisor _____

☐ Add Major

Field of Study _____ Concentration _____ Date _____

☐ Add Minor

Department Chair Signature _____ Name of Student's New Advisor _____

☐ Add Major

Field of Study _____ Concentration _____ Date _____

☐ Add Minor

Department Chair Signature _____ Name of Student's New Advisor _____

The Field of Study I will now pursue is:

(Please note that you can only choose from one of the following):

☐ Single Major

Major _____

☐ Single Major & Single Minor

Major _____ Minor _____

☐ Single Major & Double Minor

Major _____ Minor _____ Minor _____

☐ Double Major

Major _____ Major _____

Student Signature _____ Date _____

Reg Office Only: Initial & Date

Students: After collecting all required signatures, return the completed form to the Registrar's Office in-person or via email (registrar@muhlenberg.edu)

4/2025