Innovation Academy Change of Major Form (Out of IA) College of Agricultural and Life Sciences

SECTION 1: TO BE COMPLETED BY	THE STUDENT.	PLEASE PRINT	ALL INFORMATION CLEARLY.			
UF ID First Name	Last Name	<u> </u>	Date			
Semester entered UF: Spring	(year)					
	Current Major: Email:					
NOTE: Attach a personal statement explaining your reasons for applying to change to a non-IA Major. Include things such as career goals, educational objectives, etc.						
SECTION 2: TO BE COMPLETED BY THE ADVISER OF THE PROPOSED MAJOR.						
Requested Major (and specialization	on if applicable):					
Current UT GPA in requested major: Current UF GPA:						
Estimated number of credits needed to complete requested major:						
Projected semester of graduation:	Fall Spring S	ummer	(year)			
Adviser's complete plan to finish the proposed degree (attach additional page if needed)						
Spring Semester 201	Summer Semeste	er 201	Fall Semester 201			
Adviser's Comments/Conditions (circle level of support below and provide any additional comments): Support change of major Support with reservations or conditions (explained below) Do not support						
Adviser's Signature: This student is eligible to change into the personal and career goals and noted any	major/specialization listed at	oove. I have conside	ered the student's academic standing,			
Student's Signature: I have been informed of the required cou major. I understand that final approval is	rses for this major and agree	to any conditions th				

SEE NEXT PAGE FOR ADDITIONAL INSTRUCTIONS

until this form is approved. Any changes to the above plan of study prior to graduation will require adviser approval.

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SECTION 3: TO BE COMPLETED BY THE INNOVATION ACADEMY ADVISER IA Adviser's Comments/Conditions (circle level of support below and provide any additional comments):						
Support change of major	Support with reservations or conditions (explained below)	Do not support				
IA Adviser's Signature	Date:					
IA Adviser's Signature: Date: This student is eligible to change into the major/specialization listed above. I have considered the student's academic standing,						
personal and career goals and noted any required conditions in the space above.						

BRING TO 2020 MCCARTY HALL D FOR FINAL REVIEW AND PROCESSING

SECTION 4: TO BE COMPLETED BY Earned Hours:		Estimated total hou	rs for degree:
Remaining hours to Excess:			
All general education requirement	ts are met: Yes	No	
Comments or conditions:			
YOUR APPLICATION HAS BEEN:	APPROVED	DENIED	DEFERRED
CALS Signature:	Major Code:	UT: _	Date: