

Request for Change to Program of Study  
BAIS Degree  
College of Hospitality, Retail, and Sport Management

Student's Name \_\_\_\_\_ SSN \_\_\_\_\_

Complete the section that best matches your request.

ADDITION

I wish to add \_\_\_\_\_ to my \_\_\_\_\_ concentration.

\_\_\_\_\_

Reason:

SUBSTITUTION

I wish to substitute \_\_\_\_\_ for \_\_\_\_\_.

\_\_\_\_\_

Reason:

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved                      Campus Advisor \_\_\_\_\_ Date \_\_\_\_\_

HRSM Representative \_\_\_\_\_ Date \_\_\_\_\_