

Request to Declare or Change Option for Graduate Students

Office of the Registrar, CSU East Bay

This form is to be used by students in a Graduate program to declare, delete or change their option. It is not to be used for admission to a program. Graduate students wishing to change to a new graduate major or credential objective **must** file a Change of Graduate Objective form by the established deadlines.

Submit this form, with all required signatures and approvals to the Enrollment Information Center in the Student Administration Building on the Hayward Campus, the Concord Student Information Lobby, or fax to the Office of the Registrar at (510) 885-3816.

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NAME: _	(Last)		N	NetID:
	(Last)	(First)	(MI)	
ADDRES	S:			
	(Street Number)	(Street Name)	(Apartment number)	
	(City)	(State)	(Zip)	
CURREN'	T MAJOR			
	ADDCANCEL O _f	otion		
STUDEN	Γ'S SIGNATURE (Re	equired):		
PRINTED	NAME OF DEPART	MENT ADVISOR (F	Required):	
SIGNATU	JRE OF DEPARTME	NT ADVISOR (Requ	ired):	
FOR OFF	ICE USE ONLY			
Office of	the Registrar: Appro	oved: Not Approved	I	
Coded B	y: Da	ate:		