



**THE UNIVERSITY OF THE WEST INDIES  
CAVE HILL CAMPUS**

**FACULTY OF SCIENCE AND TECHNOLOGY**

**CHANGE OF MAJOR 20..../20....**

1. **SURNAME:** \_\_\_\_\_ 2. **OTHER NAMES:** \_\_\_\_\_

3. **STUDENT I.D. NO.:** \_\_\_\_\_ 4. Level I [ ] Level II [ ] Level III [ ]

5. **Telephone:** (H) \_\_\_\_\_ (Cell) \_\_\_\_\_ **Email:** \_\_\_\_\_

6. **Address (Local):** \_\_\_\_\_ **Home Address** (For overseas students):  
\_\_\_\_\_  
\_\_\_\_\_

7. **Current Major: B.Sc.** \_\_\_\_\_

8. **State desired Major: B.Sc.** \_\_\_\_\_

9. **Briefly state reason for Change of Option:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** .....

**Date:** .....

*Please return completed form to the Faculty Office, Faculty of Science and Technology. **This form is for use by the Faculty of Science and Technology students only.***

**OFFICIAL USE – DEAN'S OFFICE**

**Comments** \_\_\_\_\_

**Change Approved** [ ]

**Change Not Approved** [ ]

..... **Signature (Dean, Faculty of Science and Technology)** **Date: 20** \_\_ / \_\_ /