

ARCE CHANGE OF MAJOR INTEREST FORM

*This form is to be filled out and submitted to the ARCE Office 21-110A.
If you need assistance with this form, please contact the ARCE Office 21-110A.*

| 1. Personal Information | | | |
|---|---|---|--|
| Name | | | |
| First: <input style="width: 90%;" type="text"/> | Initial: <input style="width: 80%;" type="text"/> | Last: <input style="width: 90%;" type="text"/> | |
| Address | | | |
| Street: <input style="width: 95%;" type="text"/> | | | Apt #: <input style="width: 80%;" type="text"/> |
| City: <input style="width: 80%;" type="text"/> | State: <input style="width: 80%;" type="text"/> | Zip: <input style="width: 80%;" type="text"/> | |
| Cal Poly E-mail | | | |
| Primary: <input style="width: 95%;" type="text"/> | | | |
| 2. Academic Summary | | | |
| Degree Program | | | |
| Current Major/Minor: <input style="width: 80%;" type="text"/> | Year(s): <input style="width: 80%;" type="text"/> | Major GPA: <input style="width: 80%;" type="text"/> | Cum. GPA: <input style="width: 80%;" type="text"/> |
| Previous Major/Minor: <input style="width: 80%;" type="text"/> | Year(s): <input style="width: 80%;" type="text"/> | | |
| 3. Required Backup Documentation (Attach to this form) | | | |
| a. Transcript of all Higher Education courses. For students in their first year at Cal Poly include a high school transcript and relevant data such as SAT scores. | | | |
| b. List of Current Classes being attempted. | | | |
| c. Information demonstrating that you can meet the University requirement of completing the required course work in 204 units (2012-2013 AY Program Requirements) plus 24 additional units. | | | |
| 4. Essay | | | |
| <i>Describe in essay form your interest in the program and any applicable experience. The essay should demonstrate knowledge of the program and a vision of the professional career to which the program leads. The essay should be approximately 500 words or 2 pages in length and be attached to this document. Essay must be typewritten.</i> | | | |
| 5. Discuss Program with ARCE Faculty | | | |
| Meet with a full time ARCE Faculty member to discuss the program. Obtain signature in the box below. | | | |
| <div style="display: flex; justify-content: space-between;"> Faculty Member Signature _____ Date _____ </div> | | | |
| <div style="display: flex; justify-content: space-between;"> Student Signature _____ Date _____ </div> | | | |