Department of _____

To: Registrar's Office
              Clark Hall

Re: Request for Catalog Change

Last name: _____ First Name: _____

Banner ID: @_____ Phone: _____

Email: _____@iup.edu Major: _____

Please accept this form as an official request to have this student's Undergraduate Catalog Year changed from:

_____   Catalog Year of Initial Enrollment in the Program

_____   Catalog Year Requested

Please update the student's catalog year on the DegreeWorks record.

Signatures:

Student: _____   Date: _____

Advisor: _____   Date: _____

Chairperson: _____   Date: _____

Dean's Associate: _____   Date: _____