



University of Dallas  
Office of the Registrar

## Major and/or Concentration Declaration Form Instructions

1. Fill in name, UD ID#, date, local address, phone number, email address, and classification.
  2. If declaring a new major, adding or dropping a second major, fill in corresponding information
  3. If declaring or dropping a concentration, fill in corresponding information.
    - a. If declaring a business minor, you must switch to Bulletin Year to Fall 2016.
  4. If declaring a 4 + 1 program, select appropriate program box.
  5. Get appropriate signatures and dates
    - a. Declaring a new major – new major’s department chair and advisor
    - b. Dropping a major, or adding or dropping a concentration – no signature required
    - c. Declaring 4 + 1 program – graduate director
  6. Submit completed form to the Registrar’s Office. If you cannot bring the form to the office, you can mail, fax, or email. Please make sure entire form is complete before submitting.
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Office of the Registrar  
Cardinal Farrell Hall, Ste. 180  
1845 E. Northgate Dr.  
Irving, TX 75062  
P: 972-721-5221  
F: 972-721-5132  
Email: [registrar@udallas.edu](mailto:registrar@udallas.edu)



UNIVERSITY OF DALLAS

Major and/or Concentration Declaration Form  
Also 4+1 and/or Business Minor

Name: \_\_\_\_\_ ID Number: \_\_\_\_\_ Date: \_\_\_\_\_

Local Address and phone number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Classification:  Freshman  Sophomore  Junior  Senior

• Declaring new major in the Department(s) of: \_\_\_\_\_  BA  BS

Previous Major (if any): \_\_\_\_\_ \*BS in Business must use Fall 2017 Catalog

• I wish to declare the following Concentration: \_\_\_\_\_

•  I wish to declare a Minor in Business, and  I realize I must change my catalog/Bulletin year to Fall 2016.

• Juniors & Seniors only: I wish to declare pursuit of 4+1 in:  COB  English  Philosophy  Psychology  Theology  
 Education (Fall 2017 Catalog)

*To be completed by Department Chairman:*

\_\_\_\_\_  
Recommended Advisor/Graduate Director

\_\_\_\_\_  
Department Chairman Signature

\_\_\_\_\_  
Date

*Please return form to Registrar's Office.*

Registrar's Office Processed

Office use only:  
 Copy to \_\_\_\_\_  
Department

4+1 copy to \_\_\_\_\_  
Graduate School