

ACCELERATED BACHELOR'S DEGREE PROGRAM REMOVAL REQUEST

Instructions: Undergraduate students who wish to remove themselves from an accelerated major and declare a new plan of study must complete this form. Please complete all information on the form and obtain the required signatures. Once complete, return to the Registrar's Office for processing.

Student Name: _____

Phone: _____

Please select the accelerated program you are currently pursuing.

- ☐ Accelerated B.S. Criminal Justice
- ☐ Accelerated B.S. Criminal Justice – Philadelphia Campus
- ☐ Accelerated B.S. Health Science – Sports Medicine Studies Concentration
- ☐ Accelerated B.A. Mathematics
- ☐ Accelerated B.S. Mathematics – Computational Mathematics Concentration
- ☐ Accelerated B.S. Mathematics – Industrial Mathematics Concentration
- ☐ Accelerated B.S. Mathematics – Mathematics Concentration
- ☐ Accelerated B.S. Nutrition and Dietetics

Please confirm that you wish to remove yourself from the accelerated major selected above.

(Please initial)

Yes _____

Desired Major: _____

Plan Code: _____

Chairperson of Desired Major: _____

Date: _____

Please identify the student's new advisor (name & ID): _____

Accelerated Program Coordinator: _____

Date: _____

Corresponding Graduate Program Coordinator: _____

Date: _____

Dean of Graduate Studies: _____

Date: _____

Student's Signature: _____

Date: _____

Office Use Only

Processed by: _____ Date: _____