## **Verk**College

SEMESTER: FALL 2024 CUNYFirst Empl ID (8 digits):

## Name: SS # XXX-XX-First Last (Last 4- digits) York College Email: \_\_\_\_\_ Phone#: \_ All students MUST have a York College email account. If you do not currently have one, please visit the IT/ Help Desk. Once your application has been processed, a confirmation email will be sent to your York College email account. Please check your CUNYfirst account for updates. No Are you currently on an F1 Visa? Yes No Are you in the ACE program at York? Yes MAJOR / MINOR REQUEST **New Major:** Second Major (optional<sup>o</sup>): **New Minor** (optional<sup>o</sup>): Second Minor (optional<sup>o</sup>): $^{\circ}$ Minors and second majors are optional(are not required to earn a degree). As such, courses taken towards those requirements MAY NOT count towards full-time for Financial Aid. \*The completion of this form **DOES NOT** guarantee admission/acceptance to the following programs unless the department chairperson grants approval: Clinical Laboratory Sciences/Medical Technology, Health and Physical Education, Nursing, Occupational Therapy, Public Health, Social Work and Teacher Education programs. Descriptions for each program and criteria for formal admission can be found in the York College bulletin. The Department Chair's signature below grants approval for the major requested above. **Department Chair Signature** Date Students may submit the Declaration of Major/Minor form from the start of registration up until the 21st day of the semester. Any form received on or after the 22nd day of the semester WILL NOT be processed. Student will have to wait until the next semester when the new Declaration of Major/ Minor form becomes available. As a result of my major/minor change, I acknowledge that additional credits may be required to fulfill my graduation requirements for the new major/minor. Date Student Signature Student MUST UPLOAD form along with a valid PHOTO ID to the Office of the Registrar Secure **Portal** Printed out forms **WILL NOT** be accepted in person. **Photo ID Checked OFFICE USE ONLY** INITIALS Date: Rec'd From: Date Major/Minor Change entered on CUNYfirst: Date email sent to student:

Office of the Registrar 94-20 Guy Brewer Blvd., Jamaica, NY 11451 (718) 262-2145 <u>Registrar@york.cuny.edu</u>