ACADEMIC PROGRAM INFORMATION FORM 2022-2023





Student Last Name First Name	Student ID/SSN
Advisor Information	
Add Advisor and/or Ment	or
Remove Advisor and/or Mento	or
Add a 2nd Advisor Ad	ld a 3rd Advisor
Program Information	19-20 Catalog Year
Change major(s) from	20-21 Catalog Year
Add 2nd major	21-22 Catalog Year
Remove 2nd major	22-23 Catalog Year
Keep previously declared minor/certificate	Effective Start Term (Required)
DEGREE: Bachelor of Science Bachelor of Art (Two years of foreign/heritage language) Post Baccalaureate	
915 Interdisciplinary Studies	915.PLAW ID: Pre-Law (plus 1 area of concentration)
Area of Concentration 1	Area of Concentration 2
Please select the divisions which offer the majority of coursework in each Area of Concentration	
*Note: Your primary division will be that which corresponds with Area of Concentration 1.	
Business & Computer Science Nursing & Health	Sciences Teacher Education & Math
Business, Tech, & Service Physical, Life, Mo	ovement, & Sport Science Technical & Industrial
Humanities Social Sciences	
Student's Signature:	Date:
Advisor's Signature:	Advisor's PRINTED Name:
Mentor's Signature:	Mentor's PRINTED Name:
2nd Advisor's Signature:	2nd Advisor's PRINTED Name:
Division Chair's Signature:	2nd Division Chair's Signature:
Advising Center Approval:	Interdisciplinary Program Approval:

500 8th Avenue, RCH 108

www.lcsc.edu/registrar

208.792.2223