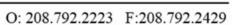
ON TIME, ON TRACK.



ACADEMIC PROGRAM INFORMATION & CHANGE OF ADVISOR FORM (2020-2021)

MOVEMENT & SPORT SCIENCES DIVISION

(located in SAC 232 phone 792-2600)

Last Name	First	Mi	Phone		SSN/Student ID Number		
			Advisor and/or		_Mentor	17-18 Acad Year	
	visor to nd advisor					18-19 Acad Year 19-20 Acad Year	
Change of I	major from			ck new major b	elow)	20-21 Acad Year	
	f a 2nd major c atalog year (mar	 k annronriate				Acad Year	
	ously declared mi		· ·	RED* Effective	Start Term		
DEGREE:	BS BA (Req	juires 2 years oj	foreign/heritage langua	ge) 🗌 F	'B (Post Bac	ccalaureate)	
	<u>c</u>	heck the Ma	jor/Catalog Year You	Are Declaring	<u> </u>		
310/320	Secondary Ed	iology (BA/BS)*	312	Sport Ad	ministration (BA/BS)*		
310/EM5	Kin: Exercise	n Occupations (BA/BS)	314	314 Exercise Science (BA/BS)*			
310.EM5AT	310.EM5AT Kin: Ex Science/HLTH Occup (BA/BS—UI cohort) 420 Sports Media Studies (
310/EM6	310/EM6 Kinesiology: Health and Fitness (BA/BS)						
310/EM7	310/EM7 Kinesiology: Sports Studies (BA/BS)						
310/EM8	Kinesiology: (Coaching (BA/E	3S)				
	* N	∕lajor REQUIRE	S two advisor signature	S			
Student's Signature:			Date:				
Advisor's Signature:			Advisor's P	RINTED Name:			
Mentor's Signature:			Mentor's P	Mentor's PRINTED Name:			
2nd Advisor's Signature			2nd Adviso	r'c DDINTED Now			
2nd Advisor's Signature:			Zilu Auviso	2nd Advisor's PRINTED Name:			
Division Chair's Signature:			2nd Divisio	n Chair's Signatu	re:		
Advising Center	Approval:						
	Is larger and						