

# Change in status of Second Undergraduate Major in the College of Agriculture and Life Sciences Cornell University

*Please return this completed form to Pamela Torelli, 140 Roberts Hall  
Please phone 254-5386 or e-mail plr2 with questions.*

Date: \_\_\_\_\_

I, \_\_\_\_\_, SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_, hereby notify CALS that I am:

**dropping my second major.**

I am following the curriculum for one major only; \_\_\_\_\_,  
advised by \_\_\_\_\_.

**changing the designation of my second major.**

I am following the curriculum for \_\_\_\_\_ AND \_\_\_\_\_.  
advised by \_\_\_\_\_ AND \_\_\_\_\_.

I understand that I will complete the requirements set forth by both departments in order to graduate with the major listed above.

I understand that it is my responsibility to keep both of my faculty advisors informed of my course enrollment and will seek advice from both, as necessary.

I further understand that when I fill out the *Application to Graduate*, I will need the signatures of both faculty advisors in order to graduate with the double major stated above.

*Signature:* \_\_\_\_\_

Primary Major: \_\_\_\_\_

Primary Faculty Advisor's name: \_\_\_\_\_  
(PRINTED)

*Primary Faculty Advisor's Signature:* \_\_\_\_\_

Second Major: \_\_\_\_\_

Second Faculty Advisor's Name: \_\_\_\_\_  
(PRINTED)

*Second Faculty Advisor's Signature:* \_\_\_\_\_

original: Student's permanent folder  
xc: Primary Advisor  
Second Advisor  
Primary Dept Contact  
Second Dept Contact