

Department of \_\_\_\_\_

To: Registrar's Office  
Clark Hall

Re: Request for Catalog Change

Last name: \_\_\_\_\_ First Name: \_\_\_\_\_

Banner ID: @ \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_@iup.edu Major: \_\_\_\_\_

Please accept this form as an official request to have this student's Undergraduate Catalog Year changed from:

\_\_\_\_\_ Catalog Year of Initial Enrollment in the Program

\_\_\_\_\_ Catalog Year Requested

Please update the student's catalog year on the DegreeWorks record.

Signatures:

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

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

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

Dean's Associate: \_\_\_\_\_ Date: \_\_\_\_\_