



# Student Service Center

550 Huntington Avenue

Boston MA 02115

Fax: 617-989-4201

Email: ssc@wit.edu

## CHANGE OF MAJOR/READMISSION

To be completed by the student

W \_\_\_\_\_  
I.D. Number Last Name First Name

Local Address City State ZIP

(\_\_\_\_) \_\_\_\_\_  
Daytime Phone Number WIT E-mail address

**CHANGE OF MAJOR:** \_\_\_\_\_  
Current Major New Major

**READMISSION:** \_\_\_\_\_  
Major

**EFFECTIVE TERM:**  Fall  Spring  Summer Year: \_\_\_\_\_

**LAPTOP:**  **Yes, I have a laptop** – please check with DTS to see if laptop must be returned  
 **No, I do not have a laptop** – complete this form and bring copy to DTS once processed

**CITIZENSHIP:** Are you an international student studying on a F-1 visa?  Yes  No  
If yes, international advisor must sign: \_\_\_\_\_

\_\_\_\_\_  
Student Signature Date

### TO BE COMPLETED BY ACADEMIC DEPARTMENT

Request for change of major or readmission is  Approved  Denied

Reason if denied: \_\_\_\_\_

New Expected Graduation Term:  Fall  Spring  Summer Year: \_\_\_\_\_

New Faculty Advisor: \_\_\_\_\_

New Catalog Year: \_\_\_\_\_

I approve this change of major or readmission

\_\_\_\_\_  
Department Chair Signature Date

