



MOODY BIBLE INSTITUTE – Missionary Aviation Technology

CHANGE OF MAJOR/PROGRAM

To be completed by the STUDENT

Name: _____ Email Address: _____ Date: _____

Student ID #: _____ Primary Phone #: _____ Planned Graduation Date: _____

Current Program: _____

Change From: _____	_____
Current Program/Major	Emphasis (for aviation students only)

New Major/Program Authorization:

New Major/Program Requested (please check one): _____ Faculty Approval _____

B.S. in Missionary Aviation Technology

Flight

Maintenance

Mr. Jim Conrad

Mr. Jim Conrad

Please give your reason(s) for requesting a change of major/program:

Signature of Student: _____ Date: _____

Please submit this form to the appropriate faculty member (above) for approval.

Faculty/Admin Advisor Authorization: _____ Date: _____

This completed form must be submitted to the Academic Records office by the first day of the student's first course of the semester in order for the program change to apply to that semester's financial aid.

Please return approved forms to the Program Manager's office for final approval

Office use only: Approved: _____ Not Approved: _____ Reviewed by: _____ Date: _____