



Request to Change Degree Program to Current Catalog Year

Please complete this form to formally request a change to the 2025-2026 academic catalog.

Completed forms should be sent to cola@marshall.edu.

Name: _____

Student ID: _____

Major(s): _____

Minor(s): _____

Catalog Year of Current Major: _____

Statement of Understanding:

I understand that by signing this form, I am agreeing to the curriculum requirements of the 2025-2026 academic catalog and may not move back to my previous academic catalog.

Student Signature: _____

Date: _____