



UNIVERSITY OF MARY HARDIN-BAYLOR
EDUCATION FOR LIFE... EXPERIENCE OF A LIFETIME

Information Update Form

This information is important for your graduation.
Print your legal name below as it appears in your records.

_____	_____	_____	_____
First Name	Middle Name	Last Name	Suffix

ID No. _____ School Email Address: _____

Cell No. (____)_____-_____ Permanent Email Address: _____

Local Address:

_____ Phone No. (____)_____-_____
 Street City ST ZIP

Permanent/Legal/Home Address:

_____ Phone No. (____)_____-_____
 Street City ST ZIP

Date you plan to graduate: Fall _____(Year) Spring _____(Year) Summer _____(Year)

Degree to be granted: _____ College: _____
 (BA, BS, BSN, BBA, BSW, BIS, etc.) (Humanities, Business, Nursing, Education, Visual and Performing Arts, etc.)

Current Major(s): _____ Current Minor(s): _____

Participating in UMHB Honors Program? Yes ___ No ___

Receiving veterans' benefits? Yes ___ No ___ If Yes, what Chapter? _____

REQUEST TO CHANGE CATALOG YEAR

I understand that by changing from the catalog in effect at the time of my first enrollment at UMHB to the new catalog requested, I am obligated to complete all degree requirements as specified in said catalog. I also understand that the same catalog will be in force for the entire degree; I must use the same catalog for both major and minor requirements.

Old Catalog Year: _____

New Catalog Year: _____

REQUEST TO CHANGE DEGREE/MAJOR/MINOR

I understand all relevant courses will be transferred to the new program of study. However, I am still responsible for completing all degree requirements according to my entrance date to the University.

Requested Change in Degree/Major/Minor:

College: _____ Degree: _____

Major: _____

Minor: _____

Teacher certification ___ EC-6 ___ 4-8 ___ 8-12 ___ All Level

New Expected Graduation Term and Year: _____

Student's Signature

Please return this form to the Registrar's Office.

Date

Fax: 254-295-5052

Email: registrar@umhb.edu