

SEMESTER: FALL 2025 CUNYFI	rst Empl ID (8 digits):	
Name:		SS#XXX-XX-
Last	First	(Last 4- digits)
York College Email:		_ Phone#:
All students <u>MUST</u> have a York College em Once your application has been processed Please check your <b>CUNYfirst account</b> for u	d, a confirmation email will be sent to y	
Are you currently on an F1 Visa?		Yes No
Are you in the ACE program at York?		Yes No
no you mand the program at terms	MAJOR / MINOR REC	
New Major:		
Second Major (optional <sup>o</sup> ):		
New Minor (optional <sup>o</sup> ):		
Second Minor (optional°):		
Minors and second majors are optional(are requirements MAY NOT count towards f	not required to earn a degree). As such, full-time for Financial Aid.	courses taken towards those
Education, Nursing, Occupational Thera Descriptions for each program and criteria Department Chair's signature below grants	for formal admission can be found in th	e York College bulletin. The
Department Chair Signature		Date
Students may submit the Declaration 21st day of the semester. Any form be processed. Student will have to Minor form becomes available.	n received on or after the <u>22nd o</u>	<u>day</u> of the semester <u>WILL NOT</u>
As a result of my major/minor cha fulfill my graduation requirements fo	ange, I acknowledge that addition or the new major/minor.	al credits may be required to
Student Signature		Date
Student MUST UPLOAD form along Portal Printed out forms WILL NO		ffice of the Registrar Secure
	OFFICE USE ONLY	Photo ID Checked
Rec'd From:	Date:	<u>INITIALS</u>
Rec'd From:  Date Major/Minor Change entered on CU		