



**COURSE CHANGES FOR PREVIOUSLY APPROVED
DOUBLE MAJOR IN SCIENCE APPLICATION FORM**

Name: _____	Student Number: _____
Email Address: _____	Phone Number: _____
Specialization for First Major Program: _____	
Specialization for Second Major Program: _____	

Please email the completed form to the Science Information Centre (advising@science.ubc.ca).

ORIGINAL APPROVED COURSES
(include credit value)

NEW COURSES TO BE APPROVED
(include credit value)

IMPORTANT NOTE: Approval from both Science Major Advisors is **required** for any course changes to the Double-Major in Science. Approval for courses for the minor does not guarantee access to space in these courses.

Approval (Office Use Only)

First Major Advisor _____

Signature _____ Date _____

Second Major Advisor _____

Signature _____ Date _____

Faculty of Science _____

Signature _____ Date _____