



Registrar's Office
4401 University Drive
Lethbridge, Alberta T1K 3M4
Fax: 403-329-5159
Phone: 403-320-5700
admissions@uleth.ca

ADD A SECOND MAJOR

· For additional information on program options, please refer to the [Undergraduate Program Grid](#).

University of Lethbridge ID Number:	Upcoming Effective Term: o Fall 20____ o Spring 20____
Last Name:	First Name:
Current Program: Faculty: _____ Program: _____ Major: _____	
Add: Second Major: _____	

DECLARATION

1. I acknowledge that it is strongly advised that I talk to an academic advisor prior to submitting this form.
 2. I have reviewed the admission requirements for the program as indicated and, to the best of my knowledge, I have or will have completed the admission requirements by the term of admission for the program to which I am applying.
 3. I acknowledge that mandatory Minors, or mandatory Concentrations, or mandatory Specializations, will be added to my Program.
 4. I authorize my acceptance of admission to the program if all admission requirements are met.
 5. I acknowledge that admission into the new Faculty/School/Major does not constitute a guarantee that I will be able to register for any particular course in a given term.
 6. I acknowledge that changing my Program and/or Major may affect my existing course registration.
 7. I acknowledge that I can only submit one application per term.
- I have read and accept the terms outlined above.

Once complete, please save this form and attach it to an email addressed to admissions@uleth.ca from your '@uleth.ca' email address or submit a paper copy to the Registrar's Office located in SU140.

Student signature required if submitting paper copy

Date

The personal information on this form is collected under the authority of the *Post-secondary Learning Act* (Alberta) and the *Freedom of Information and Protection of Privacy Act* (Alberta). Your information will be used for admission, registration, scholarships and awards administration; academic progress monitoring, planning and research; alumni relations; contacting you about University courses and services; and operating other University-related programs. The University of Lethbridge may share and disclose information within the University to carry out its mandate and operations. Specific data will be disclosed to the relevant student associations, and to the federal and provincial governments to meet reporting requirements. For questions on the collection, use and disclosure of this information, please contact the University's FOIP Coordinator at 4401 University Drive West, Lethbridge, AB T1K 3M4; email: foip@uleth.ca; tel: 403-332-4620.

For Office Use Only