

Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

---

Major 1 \_\_\_\_\_ Major 2 \_\_\_\_\_ Major 3 \_\_\_\_\_

---

Minor 1 \_\_\_\_\_ Minor 2 \_\_\_\_\_ Minor 3 \_\_\_\_\_

Are you seeking Secondary Education Certification?  Yes  No

Are you seeking Educational Licensure?  Yes  No

If you are an elementary education major select one: 2nd major, minor, or 12-hour concentration: \_\_\_\_\_

If you wish to change your catalog, indicate year that you wish to change to:  
 03-04 Catalog  04-05 Catalog  05-06 Catalog  06-07 Catalog  07-08 Catalog  08-09 Catalog

---

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form to the Registrar's Office**  
BVU, Office of the Registrar, 610 W. Fourth Street, Box 2009, Storm Lake, IA 50588  
www.bvu.edu/registrar • 712.749.2233 • Fax: 712.749.1466