

THE SCHOOL OF ENVIRONMENT AND NATURAL RESOURCES
Specialization Declaration Form

Name: _____ Student ID No. _____

OSU email: _____ Telephone: _____

Major: _____

I hereby declare my specialization to be: _____.

I understand that I can change my specialization at any time by submitting a new Specialization Declaration Form to the SENR Academic Office in 210 Kottman Hall.

Student Signature

Date

Office Use Only

Academic advisor assigned: _____

Faculty mentor assigned: _____

SIS Updates Made: _____

Initials

Date



THE OHIO STATE UNIVERSITY

COLLEGE OF FOOD, AGRICULTURAL,
AND ENVIRONMENTAL SCIENCES

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