FOR OFFICE USE ONLY
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Completed _____

Eastern Kentucky University
Department of Family & Consumer Sciences

Application to Change from *Pre-Child and Family Studies* to
CHILD AND FAMILY STUDIES

Child Development Option _____ Interdisciplinary Early Childhood (IECE) Option____

Submit this application to your advisor **within the first two weeks of the semester following completion of all Pre-child and Family Studies requirements**. A copy of this form will be mailed to you showing the status of your application.

Name: _____ EKU ID: _____

EKU Email: _____ Telephone Number: _____

Local Mailing Address: _____
Street City State Zip Code

Total Number of Semester Hours Completed_____ Over-All Cumulative GPA _____

You must have a minimum of 45 hours with a 2.75 overall GPA.

GPA OF 3.0 Required in Courses Below			
Course	**Transfer Course** **(Substitution for this class)**	**Semester Taken**	**Grade Received** **(Must be "C" or better)**
CDF 203			
CDF 235			
CDF 236			
CDF 246			
CDF 310			
CDF 327			

_____
Applicant Signature Date

_____ ☐ Approve ☐ Disapprove Comment:_____
Academic Advisor Signature Date

_____ ☐ Approve ☐ Disapprove Comment: _____
CDF Program Director Signature Date