

# DOUBLE PROGRAM OR MAJOR FORM



Office of the Registrar/Student Services  
Fax (403) 556-4711 [www.oldscollege.ca](http://www.oldscollege.ca)

**PERSONAL DATA (PLEASE PRINT CLEARLY)**  
Olds College Student Number  

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Surname (legal)  
  
First Name (legal)  
  
Full Middle Name (legal)

**GENERAL INFORMATION**

- Students who are planning to complete two programs/majors **must** meet the academic requirements for both.
- Before adding a second program/major you should consult with the appropriate program coordinator(s).

Current Program/Major  
  
Current Program/Major Coordinator Signature  
  
Second Program/Major  
  
Second Program/Major Coordinator Signature  
  
Student Service Officer Signature  
  

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Student Signature  
  
Date

**For Office Use Only:**  
Date Entered \_\_\_\_\_  
Initials \_\_\_\_\_

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. Public inquiries regarding the collection, use and disclosure of personal information provided on this form should be directed to the FOIP Co-ordinator of Olds College at 4500 – 50 Street, Olds, AB T4H 1R6.