

**Therapeutic Recreation  
New Major Program Application  
Eastern Michigan University**

Name: \_\_\_\_\_ Student Number \_\_\_\_\_  
Please print

Contact Address: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Intended start date for major classes: \_\_\_\_\_ / \_\_\_\_\_  
semester year

Work and/or Volunteer Experience related to Therapeutic Recreation:

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Academic Minor (if any): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Do Not Complete Below This Point**

**Assigned Adviser:** \_\_\_\_\_ **Office:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**To complete application process: 1) must schedule an interview with major advisor  
& 2) must declare major with academic records in Pierce Hall**