

The Major Audit Form is to be completed prior to entering the baccalaureate year to provide a specific plan for completion of the requirements of the major. It is one of three forms comprising the Baccalaureate Plan which is part of your permanent academic record..

Name (Please Print) \_\_\_\_\_ ID# \_\_\_\_\_ Current Advisor \_\_\_\_\_  
 Major Advisor \_\_\_\_\_  Primary major advisor?  First major?  Second major?  
 If you are changing your major, what was your old major? \_\_\_\_\_

**Anthropology BA**

**disciplinary, 10 courses**

At least 6 courses must be unique to any major. All courses for the major must be completed with a grade of C- or better.

Check if unique	Check if completed	Planned semester	Course	Notes, substitutions, etc.
Required courses for all majors				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ANTH273	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ANTH306	_____
An anthropology seminar (either a 400-level seminar or a 200 or 300-level seminar with an advanced component)				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ANTH__	_____
An anthropology course focused on a geographic area				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ANTH__	_____
Six additional anthropology electives including two outside of the student's primary field of specialization. At least one of these electives must be at the 300 level. Field of specialization: _____				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

*One 200 or higher level sociology course can substitute for a 200-level anthropology elective*

**Comments:**

**Major Certification**

We agree that the successful completion of the program of courses indicated above will constitute an acceptable major. (Compliance with uniqueness rules and other requirements to be confirmed by Registrar.)

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

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Department or Program Chair Signature \_\_\_\_\_ Date \_\_\_\_\_