

# Major Declaration and Audit Form Hobart and William Smith Colleges

2/8/2008

- Declaration  
 Audit

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? \_\_\_\_\_

## Sociology 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"/>	_____	SOC 100	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC 211	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC 212	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC 300	_____
SOC 464 or other approved seminar				
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____
Five sociology electives, at least one at the 300-level				
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	SOC ____	_____

*One 200 or 300-level ANTH course may substitute for a 200-level sociology 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 \_\_\_\_\_