

Name (Please Print) \_\_\_\_\_

ID# \_\_\_\_\_

Current Advisor \_\_\_\_\_

Declaration  Audit

Major Advisor (Please Print) \_\_\_\_\_  First major?  Second major? Anticipated Grad Year \_\_\_\_\_

If you are changing your major, what was your old major? \_\_\_\_\_

**Art Studio BA**

**disciplinary, 12 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. Credit/no credit courses may not be counted toward the major.

Check if unique	Check if completed	Planned semester	Course	Notes, substitutions, etc.
Three courses from the Introductory group: ARTS 105; (114 or 115); 125; (161, 165 or 166):				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
Four 200-level Art Studio courses:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
Two 300-level Art Studio courses:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS _____	_____
Art Studio Seminar				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTS 480	_____
Two Art History courses:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTH _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	ARTH _____	_____

**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 will be confirmed by the Registrar.)

Student signature \_\_\_\_\_

Date \_\_\_\_\_

Major Advisor signature \_\_\_\_\_

Date \_\_\_\_\_

Department or Program Chair signature \_\_\_\_\_

Date \_\_\_\_\_