

Major Declaration and Audit Form Hobart and William Smith Colleges

9/29/2015

- 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? _____

French and Francophone Studies: Interdisciplinary BA

interdisciplinary, 14 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. All courses numbered FRE 225 or above count for the major. The major consists of 8 departmental courses and 6 courses from other disciplines. Upon declaring this major the student selects an area of concentration. No more than one French/Francophone literature/culture course taught in English may count toward the major. Students must also complete the senior portfolio requirement.

Check if unique	Check if completed	Planned semester	Course	Notes, substitutions, etc.
Two FRE 240-level courses				
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
Two FRE 250-level courses to be taken before the senior year				
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
Two FRE 300-level courses				
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	FRE _____	_____
Two French & Francophone Studies electives selected in consultation with the advisor				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Six courses from other disciplines selected according to the interdisciplinary area of concentration chosen in consultation with the advisor				
<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"/>	_____	_____	_____

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 _____