

Major Declaration and Audit Form

Hobart and William Smith Colleges

9/25/2013

- 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? _____

Latin 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.
 No more than one course with a CR grade may be counted towards the major.

Check if unique	Check if completed	Planned semester	Course	Notes, substitutions, etc.
Seven Latin courses, at least four at the 200-level and one at the 300-level.				
<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"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
Five additional classics courses or other courses approved by 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 _____