Major Declaration and Audit Form  Hobart and William Smith Colleges  08/01/2020

☐ Declaration  ☐ Audit

Declaration form: to be completed on first declaring a major. Audit form: to be completed before entering the senior year.

Name (please print) ___________________________________________  ID# __________________________  Current Faculty Advisor _______________________________________

Major Advisor ___________________________________________  □ Primary major advisor?  □ First major  □ Second major

If changing your major, what was your old major? ___________  □ HO  □ WS  Anticipated Grad Date: ___________

American Studies BA  interdisciplinary, 11 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 2 courses taken for Credit/No Credit may be counted toward the major. No more than four courses may be taken in any one department outside of American Studies.

<table>
<thead>
<tr>
<th>Check if unique</th>
<th>Check if completed</th>
<th>Planned semester</th>
<th>Course</th>
<th>Notes, substitutions, etc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td></td>
<td>AMST 101</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>□</td>
<td></td>
<td>AMST 201</td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>□</td>
<td></td>
<td>AMST 465</td>
<td></td>
</tr>
</tbody>
</table>

Two Foundations courses:

<table>
<thead>
<tr>
<th>Check if unique</th>
<th>Check if completed</th>
<th>Planned semester</th>
<th>Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** At least two of the following must be AMST courses at 300-level or higher.

- Inequalities and –Isms cluster elective
  □  □  

- Arts and Cultural Production cluster elective
  □  □  

- Structures and Institutions cluster elective
  □  □  

- Borders and Empires cluster elective
  □  □  

- Theories and Approaches cluster elective
  □  □  

- One elective from any of the five thematic clusters
  □  □  

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 ________________