



Full Name: _____ Major: _____

Length of study:

- Fall
 Academic Year
 Spring

Home department: _____ *I understand that I must take 50 percent of my courses within this department. List two courses and two alternates.*

Department <i>(Example: History)</i>	Code <i>(HIST7106)</i>	Course Title <i>(Ancient Greek Religion)</i>

Joint department: _____ *Complete this section only if you meet the qualifications discussed in the Course Form Guidelines section. If you do not, the request for a joint department will be disregarded.*

Department	Code	Course Title

Other courses outside my home (and joint) department that I would be interested in taking. List two courses and two alternates.

Department	Code	Course Title

Back-up department: _____ *To be applied to only if I am not accepted by my home department. List two courses and two alternates.*

Department	Code	Course Title

***Please retain a copy of this form for your records.**

