

Bachelor of University Studies
Multidisciplinary Studies
(major code UNST MLTI option)
2010-2011
Declaration of Major Form

Name _____ Student ID _____

College of Enrollment _____ Student email _____

Student's Educational Objectives (Be specific) : _____

Option 1 – 3 Areas of Concentration

For each area of concentration, indicate the name of the department/program and college, and whether you plan to complete a minor, certificate, the "major" portion of an AA, AS or AAS degree, or at least 18 hours of coursework in the department. If you are not completing a minor or certificate, you must obtain the signature of the departmental representative (faculty or adviser).

Area of concentration 1: _____ College _____

___ minor or certificate (course substitutions must be approved by departmental representative in area of concentration. Complete minor/certificate certification form in department.)

___ "major" portion of AA, AS or AAS degree

___ at least 18 hours of coursework _____

Signature of departmental representative

date

Course Prefix	Course Number	Course Title	Grade

Area of concentration 2 _____ College _____

___ minor or certificate (course substitutions must be approved by departmental representative in area of concentration. Complete minor/certificate certification form in department.)

___ "major" portion of AA, AS or AAS degree

___ at least 18 hours of coursework _____

Signature of departmental representative _____ date _____

Course Prefix	Course Number	Course Title	Grade

Area of concentration 3 _____ College _____

___ minor or certificate (course substitutions must be approved by departmental representative in area of concentration. Complete minor/certificate certification form in department.)

___ "major" portion of AA or AS degree

___ at least 18 hours of coursework _____

Signature of departmental representative _____ date _____

Course Prefix	Course Number	Course Title	Grade

Option 2 – 2 Areas of Concentration

For each area of concentration, indicate the name of the department/program and college, and whether you plan to complete a minor, certificate or at least 27 hours of coursework in the department. If you are not completing a minor or certificate, you must obtain the signature of the departmental representative (faculty or adviser).

Area of concentration 1 _____ College _____
 ___ minor or certificate (course substitutions must be approved by departmental representative in area of concentration. Complete minor/certificate certification form in department.)
 ___ at least 27 hours of coursework _____
 _____ Signature of departmental representative _____ date

Course Prefix	Course Number	Course Title	Grade

Area of concentration 2 _____ College _____
 ___ minor or certificate (course substitutions must be approved by departmental representative in area of concentration. Complete minor/certificate certification form in department.)
 ___ at least 27 hours of coursework _____
 _____ Signature of departmental representative _____ date

Course Prefix	Course Number	Course Title	Grade

Courses to meet general education requirements

Students must complete at least 40 hours of general education courses

General Education Requirement	Course Prefix	Course Number	Course Title	Grade
English 1	ENGL	1113	Freshman Composition	
English 2	ENGL	1213	Freshman Composition	
American History	HIST	1103	Survey of American History	
Political Science	POLS	1113	American Government	
Analytic 1 "A"				
Analytic 2 "A"				
Humanities 1 "H"				
Humanities 2 "H"				
Natural Sciences 1 "N"				
Natural Sciences 2 "N"				
Scientific Investigation "L" – write an "L" next to the title of the "N" course above that fulfills this requirement				
Social Sciences 1 "S"				
Social Sciences 2 "S"				
Other general education courses to total 40 hours (or more if required by college)				
International Dimension "I" – write an "I" next to the title of the course anywhere on this plan of study that fulfills this requirement				
Diversity "D" – write a "D" next to the title of the course anywhere on this plan that fulfills the diversity requirement				

Additional courses completed

Course Prefix	Course Number	Course Title	Grade

___ upper division hours (minimum 45 hours)

___ upper division courses from areas of concentration (minimum 27 hours)

___ hours completed at four year institution (minimum 60 hours)

Please print name after signature.

Student Date

Adviser Date

Dean or Designated College Official Date

Registrar Date

Assoc Vice President for Academic Affairs Date

Student Name _____

Student ID _____

**Bachelor of University Studies
Multidisciplinary Studies
Substitution Form**

COURSES TO BE ADDED

Course Prefix	Course Number	Course Title

COURSES TO BE DROPPED

Course Prefix	Course Number	Course Title

Please print name after signature.

Adviser Date

Dean or Designated College Official Date

Registrar Date

Assoc Vice President for Academic Affairs Date