

Original Form Revised (Date) _____

Name: _____ PID: _____ Class Level: _____
Last First Middle

College: _____ Phone: (____) _____ Email: _____

Degree Objective: BA BS

First Major: _____ Code: _____
 Lower Division Requirements

1. _____ 3. _____
 2. _____ 4. _____

Upper-Division (*Do not list overlaps*)

Subject/Number	Subject/Number
1. _____	11. _____
2. _____	12. _____
3. _____	13. _____
4. _____	14. _____
5. _____	15. _____
6. _____	16. _____
7. _____	17. _____
8. _____	18. _____
9. _____	19. _____
10. _____	20. _____

Degree Objective: BA BS

Second Major: _____ Code: _____
 Lower Division Requirements

1. _____ 3. _____
 2. _____ 4. _____

Upper-Division (*Do not list overlaps*)

Subject/Number	Subject/Number
1. _____	11. _____
2. _____	12. _____
3. _____	13. _____
4. _____	14. _____
5. _____	15. _____
6. _____	16. _____
7. _____	17. _____
8. _____	18. _____
9. _____	19. _____
10. _____	20. _____

List overlaps of upper division courses to satisfy requirement in both majors

1. _____ 2. _____ 3. _____ 4. _____

I verify that I have attached my Statement of Purpose and Academic Planning Worksheet:

Student Signature: _____ Date: _____

First Major

Approved Disapproved

For Official Use Only

Second Major

Approved Disapproved

Department/Program Authorization _____ Date _____

Department/Program Authorization _____ Date _____

Units Completed: _____ Units Remaining: _____ Cumulative GPA: _____	Comments: _____	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved _____ College Advising Office Date
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