

List all courses required for your first major		
Course number	Course title	Semester & year when course was taken, transferred in or will be taken
Major Department Chair:		

Approval Signature

Date _____

[illegible]

Department Chair:		
	<i>Approval Signature</i>	<i>Date</i>

Student signature and date: _____

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**Upon completion please route to the Vice President for Academic Affairs for final approval**

|       |                  |             |
|-------|------------------|-------------|
| VPAA: |                  |             |
|       | <i>Signature</i> | <i>Date</i> |

The Vice President for Academic Affairs will return form to the Registrar’s Office