

HAVERFORD Office of the Registrar

DECLARATION OF MAJOR, MINOR, or CONCENTRATION

Name: _____ ID: _____ Class: _____ College Attending: _____

Major: _____ Location: _____ Major (if not listed): _____

*2nd Major: _____ Location: _____ *Dean's Signature: _____

Minor (If any): _____ Concentration (If any): _____

***Dean's signature required for 2nd Major only.**

NOTE: Students must, at the time of declaring a major, declare a minor and/or concentration, if they choose to fulfill either or both.

Please complete the following schedule as fully as possible at this time. It is understood that major course choices may be tentative; changes in major courses may be made, when and if appropriate, with the approval of the major advisor.

| | Major Courses | | | Minor Courses | | |
|---|---------------|--------|--------------|--------------------------------|--------|--------------|
| | Dept | Number | Course Title | Dept | Number | Course Title |
| Courses Taken Before Junior Year | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Junior Year Courses | | | | | | |
| | | | | | | |
| | | | | Minor Advisor Signature: _____ | | |
| | | | | Concentration Courses | | |
| | | | | | | |
| Senior Year Courses | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | Conc. Advisor Signature: _____ | | |

Approved: _____
Student's Advisor Signature Date

Student's Signature Date

Complete the above information, and then print this page.
 Return **SIGNED** copy to the Office of the Registrar.