

Application for Declaration of Major

John Carroll University College of Arts and Sciences (CAS)

Please attach a copy of your degree evaluation

Name: _____
Phone #: _____

Banner ID: _____
Email: _____

Check the department and *major* you are declaring at this time: 1st Major; 2nd Major; **Interdisciplinary Major***

BACHELOR OF ARTS OR BACHELOR OF ARTS IN CLASSICS

- Art History
- Classics
 - Classical Languages*
 - Classical Studies*
- Communication & Theatre Arts
 - Integrated Marketing*
 - Journalism*
 - Persuasive & Relational Comm.*
 - Theater*
 - Visual Media*
- East Asian Studies***
- Economics (CAS)
- Education
 - Early Childhood*
 - Middle Childhood*
 - Multi-Age (contact ED. Dept.)*
 - Adol/Young Adult (contact ED. Dept.)*
- English
 - Literature*
 - Creative Writing*
 - Professional Writing*
- Exercise Science
- History
- Humanities***

- International Business with Language & Culture***
- Mathematics Teaching
- Modern Languages
 - French*
 - Spanish*
- Peace, Justice & Human Rights***
- Philosophy
 - History of Philosophy*
 - Critical Social Philosophy*
 - Philosophy, Law & Politics*
 - Health, Ethics, & Science*
- Physical Education
- Physics
- Political Science
 - Law & Society*
- Global & Foreign Area Studies
- Methods & Spatial Analysis
- Self-Designed Major**
- Sociology & Criminology
 - Criminology*
 - Cultural Diversity*
 - Human Service, Health, & Social Justice*

- Theology & Religious Studies
- Women's and Gender Studies***
- World Literature***

BACHELOR OF SCIENCE

- Biochemistry
- Biology
- Cell & Molecular Biology
- Comprehensive Chemistry
- Computer Information Systems
- Computer Science
- Economics
- Environmental Science
- Engineering Physics
- General Chemistry
- Mathematics
- Physics
- Psychology
 - Child & Family Studies*
 - Eating Disorders*
 - Forensic Psychology*
 - Industrial/Organizational Psychology*
 - Mental Health Services*
 - Psychology & Sports Sciences*
- Self-Designed Major**

Anticipated Graduation Date (If unsure, please indicate an estimated date): December, 20__ or May, 20__ or Aug 20__

Notification and signature: **You will be notified by the academic department regarding the status of your application.**

Student Signature: _____ Date: _____

Pre-Major Advisor Signature: _____ Date: _____

For Declaring Department Use Only:

Major: _____ Accepted: _____ Date: _____

Conditional Acceptance (if applicable): _____ Denied: _____ Date: _____

Major Advisor Assigned: _____

Department Chair Signature: _____ Date: _____

Please retain the original form for your departmental records and send a copy of the approved form to Assistant Dean's Office (CAS) Room AD05 to the attention of Diane Campbell. Thank you

Assistant Deans Signature: _____ Date Received _____