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* 
If considering a minor or concentration, please list: ______________________________________________________________________

BACHELOR OF ARTS OR BACHELOR OF ARTS IN CLASSICS 
□ Art History  □ International Business with Language & Culture*  □ Sports Studies 
□ Classics  □ Mathematics Teaching  □ Theology & Religious Studies 
  □ Classical Languages  □ Modern Languages  □ Women's and Gender Studies* 
  □ Classical Studies  □ French  □ World Literature* 
□ Communication & Theatre Arts  □ Peace, Justice & Human Rights*  □ BACHELOR OF SCIENCE 
  □ Integrated Marketing  □ Philosophy  □ Biology 
  □ Journalism  □ History of Philosophy  □ Biochemistry 
  □ Persuasive & Relational Comm.  □ Critical Social Philosophy  □ Comprehensive Chemistry 
  □ Theater  □ Philosophy, Law & Politics  □ General Chemistry 
  □ Visual Media  □ Health, Ethics, & Science  □ Computer Information Systems 
□ East Asian Studies*  □ Peace, Justice & Human Rights*  □ Computer Science 
□ Economics (CAS)  □ Philosophy  □ Economics 
□ Education  □ History  □ Integrated Marketing 
  □ Early Childhood  □ Physical Education  □ Integrated Marketing 
  □ Middle Childhood  □ Political Science  □ Self-Designed Major 
  □ Multi-Age (contact ED. Dept)  □ Law & Society  □ Sociology & Criminology 
□ Adol/Young Adult (contact ED. Dept.)  □ Global & Foreign Area Studies  □ Criminology 
□ English  □ Methods & Spatial Analysis  □ Cultural Diversity 
  □ Literature  □ Self-Designed Major  □ Human Service, Health, & Social Justice 
□ Creative Writing  □ Self-Designed Major  □ Self-Designed Major 
□ Professional Writing  □ Psychology & Sports Sciences

Anticipated Graduation Date (If unsure, please indicate an estimated date): □ December, 20__ or □ May, 20__ or □ Aug 20__ 
Student Signature: ____________________________________ Date: _____________ 
Pre-Major Advisor Signature: ____________________________

********************************************************************************************
For Declaring Department Use Only:
Major: __________________________________________ Accepted: ________ Date: _____________ 
Conditional Acceptance (if applicable): __________________ Denied: __________ Date: _____________ 
Major Advisor Assigned: _________________________________________(Please deactivate previous interest and advisor) 
Chair Signature: __________________________________________ Date: ______________

Please retain the original form for your departmental records and record all changes in Banner.

Revised Fall 2014