

# Individualized Major (BA) Approval Form

A student who wishes to declare an individualized major will ordinarily need to do so in writing only **after** completing 30 credit hours and **before** completing 48 credit hours. A student seeking to pursue an individualized major will select faculty co-advisors from two different disciplines, or a faculty advisor and an advisor from the Academic Advising office. In consultation with the co-advisors, the student will submit a program of study to the Associate Provost of Student Learning and Dean of Faculty that:

- Includes a personal statement of intent (300-word minimum) that explains the unique nature of the individualized major; the intellectual, career, and/or creative path; and student learning outcomes.
  - Outlines the courses the student intends to complete; programs of study shall:
    - Be composed of no less than 40 credit hours
    - Include at least 4 courses at the 300- or 400- levels\*
    - Include no more than 4 courses at the 100-level\*
- \*Ordinarily, the program of study should include at least 16 credit hours from each of two different disciplines.
- Explains how (at least) two Signature Learning Experiences will be completed as part of the proposed academic course of study.
  - Names two faculty advisors from two different disciplines, or a faculty advisor and an advisor from the Academic Advising office. **Both signatures must be included.** All involved departments contributing at least 16 credit hours will count the student as a major.

Students cannot propose an individualized major necessitating certification by an external accrediting body. Upon formal approval by The Associate Provost of Student Learning and Dean of Faculty, Registration and Records will officially update the students' academic record with the individualized major. The Associate Provost of Student Learning and Dean of Faculty and both co-advisors must approve any changes to the program study **before** additional and/or alternate courses will count toward the student's major requirements.

Name \_\_\_\_\_ ID# \_\_\_\_\_ Box# \_\_\_\_\_ Telephone# \_\_\_\_\_

Major Name \_\_\_\_\_ Etown email address \_\_\_\_\_

1<sup>st</sup> Advisor's Name and Discipline (please print) \_\_\_\_\_

2<sup>nd</sup> Advisor's Name and Discipline (please print) \_\_\_\_\_

**Personal Statement (300-word minimum; please attach additional pages if necessary):**

**List Courses You Plan to take:**

*100-Level Courses (no more than 4 can count for Individualized Major)*

Course Number	Course Title	Credits	Major//Core/Elective Requirement to be Met? (i.e.: Major elective and/or Core AU, or Free Elective)	Discipline of Study (Course Code (i.e. PSY))	Semester Taken	Grade

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Please list any alternate 100-Level Courses in this box, if applicable

Course Number	Course Title	Credits	Major//Core/Elective Requirement to be Met? (i.e.: Major elective and/or Core AU, or Free Elective)	Discipline of Study (Course Code (i.e. PSY))	Semester Taken	Grade

300/400-Level Courses (at least 4)

Course Number	Course Title	Credits	Major//Core/Elective Requirement to be Met? (i.e.: Major elective and/or Core AU, or Free Elective)	Discipline of Study (Course Code (i.e. PSY))	Semester Taken	Grade

Please list any alternate 300/400-Level Courses in this box, if applicable

Course Number	Course Title	Credits	Major//Core/Elective Requirement to be Met? (i.e.: Major elective and/or Core AU, or Free Elective)	Discipline of Study (Course Code (i.e. PSY))	Semester Taken	Grade


*Signature Learning Experiences (at least 2)*

Course Number	Course Title	Credits	Major//Core/Elective Requirement to be Met? (i.e.: Major elective and/or Core AU, or Free Elective)	Discipline of Study (Course Code (i.e. PSY))	Semester Taken	Grade

*Educational Assessment: Please list 2-3 Student Learning Outcomes and Indicate the Method of Assessment*

SLO	<u>Institutional Learning Goal(s)</u> to which SLO is Mapped	Method of Assessment

**Student Agreement:** I have discussed my plan of study in detail with my academic advisors and we have agreed on the courses listed above.

I have also read and understand the instructions and policies.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Associate Provost Signature \_\_\_\_\_ Date \_\_\_\_\_

*Distribution: Student, Advisors, Registrar*