

Eleanor Roosevelt College Individual Studies Major Proposal

NAME: _____ DATE: _____

ADDRESS: _____

_____ PHONE: _____

PID#: _____ QUARTERS AT UCSD: _____ GPA: _____

UNITS COMPLETED: _____ UNITS NEEDED TO COMPLETE MAJOR: _____

TITLE OF INDIVIDUAL STUDIES MAJOR: _____

FACULTY ADVISOR:

LOWER DIVISION PREPARATION FOR THE MAJOR:

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

UPPER DIVISION COURSES FOR INDIVIDUAL STUDIES MAJOR (COURSE NO. AND TITLE):

- | | |
|-----------|-----------|
| 1. _____ | 11. _____ |
| 2. _____ | 12. _____ |
| 3. _____ | 13. _____ |
| 4. _____ | 14. _____ |
| 5. _____ | 15. _____ |
| 6. _____ | 16. _____ |
| 7. _____ | 17. _____ |
| 8. _____ | 18. _____ |
| 9. _____ | 19. _____ |
| 10. _____ | 20. _____ |

For Office Use Only

Student must complete ____ courses from the above list. Courses with * are required. Comments:

APPROVAL OF INDIVIDUAL MAJOR

APPROVAL OF INDIVIDUAL MAJOR

Faculty Advisor

Date

ERC Executive & Policy Committee

Date