

**Election of Major**  
**Art (24 hours)**  
**Associate of Arts Degree**  
 2008-2009 Catalog

Name \_\_\_\_\_ I.D. Number \_\_\_\_\_

Planned Degree Completion Date: Mo. \_\_\_\_\_ Yr. \_\_\_\_\_

**Required Courses**

**Hours**

Do not write in shaded area

	ART 131	Basic Design	3.0
	ART 201	Art and Life	3.0
	ART 213	Figure Drawing	3.0
	ART 321	Graphic Design	3.0

Twelve hours of electives in art:


Explain transfer, substitutions, or other irregularities:

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Chair Signature \_\_\_\_\_ Date \_\_\_\_\_

***I understand I have final responsibility for monitoring my graduation requirements.***

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form to the Office of the Registrar**