

Election of Major Art

Studio Focus Concentration (39 hours)

Bachelor of Arts 2019-2020 Catalog

Name _____ I.D. Number _____

Planned Degree Completion Date: Mo. _____ Yr. _____

| Required Courses | Hours |
|---|--------------|
| <small>Do not write in shaded area</small> [shaded] ART 131 Basic Design | 3.0 |
| [shaded] ART 201 Art and Life | 3.0 |
| [shaded] ART 213 Figure Drawing | 3.0 |
| [shaded] ART 346 History of Modern and Contemporary Art | 3.0 |

Fourteen hours of electives from departmental courses that reflect area of focus:

| | | | |
|---|-------|-------|-------|
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |

Thirteen hours of electives from Art or interdepartmental courses, with department approval:

| | | | |
|---|-------|-------|-------|
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |
| <input style="background-color: #cccccc;" type="text"/> | _____ | _____ | _____ |

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