

# Art Major - Check Sheet

## 2000-01 Catalog

Name \_\_\_\_\_  
SSN \_\_\_\_\_

### Catalog Description:

**Major in Art:** The major requires completion of 39 hours, including 151 each semester of attendance up to a total of 8 semesters of satisfactory completion, 201, 202, 203, 207, 250, 303, 304, 401, 402, and 499.

### Check List (based on the above description):

Note: A grade of "C" or higher is required in all the courses listed below.

#### Art

Specifically Required (30 hours):

- |         |                                    |                    |
|---------|------------------------------------|--------------------|
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 151 (0) | <input type="checkbox"/> completed | _____ term planned |
| 201 (3) | <input type="checkbox"/> completed | _____ term planned |
| 202 (3) | <input type="checkbox"/> completed | _____ term planned |
| 203 (3) | <input type="checkbox"/> completed | _____ term planned |
| 207 (3) | <input type="checkbox"/> completed | _____ term planned |
| 250 (3) | <input type="checkbox"/> completed | _____ term planned |
| 303 (3) | <input type="checkbox"/> completed | _____ term planned |
| 304 (3) | <input type="checkbox"/> completed | _____ term planned |
| 401 (3) | <input type="checkbox"/> completed | _____ term planned |
| 402 (3) | <input type="checkbox"/> completed | _____ term planned |
| 499 (3) | <input type="checkbox"/> completed | _____ term planned |

Elective (at least 9)

- |           |                                    |                    |
|-----------|------------------------------------|--------------------|
| _____ ( ) | <input type="checkbox"/> completed | _____ term planned |
| _____ ( ) | <input type="checkbox"/> completed | _____ term planned |
| _____ ( ) | <input type="checkbox"/> completed | _____ term planned |

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Student Signature

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Date

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Program Coordinator Signature

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Date

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Department Chair Signature

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Date

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**To be completed by the Registrar's Office**

\_\_\_\_\_ Date received

\_\_\_\_\_ Date Reviewed

Notes:

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