



COLLEGE OF LETTERS & SCIENCE
 University of Wisconsin-Madison
The Heart of a Great University

**COLLEGE OF LETTERS AND SCIENCE
 UNIVERSITY OF WISCONSIN-MADISON
 MAJOR/CERTIFICATE/OPTION
 DECLARATION/CANCELLATION**
 L&S Form 5/05

STUDENT FILLS OUT THIS PART

Campus ID Number	Current Date (Month/Day/Year)	Academic Year (Circle One) 1 2 3 4
Last Name	First Name	Middle Initial
Email address @wisc.edu		Phone Number
Program (Circle One) BA BS _____ Other*		*Other School/College
Other Major(s)	Student Signature	

***STUDENTS NOT IN THE COLLEGE OF LETTERS AND SCIENCE:**

This major/certificate declaration/cancellation is subject to approval by the Dean of the College in which you are enrolled.

ADVISOR FILLS OUT THIS PART

Major/Certificate Code 765	Option Code	Department or Title DEPARTMENT OF PHILOSOPHY Room 5185, Helen C. White Hall, 263-3700
Advisor's Name (Must be filled in for processing)	Advisor's Phone Number	Advisor's email
Choose One: Declaration <input type="checkbox"/> Major <input type="checkbox"/> Certificate <input type="checkbox"/> Option Cancellation <input type="checkbox"/> Major <input type="checkbox"/> Certificate <input type="checkbox"/> Option Revision <input type="checkbox"/> Major <input type="checkbox"/> Certificate <input type="checkbox"/> Option		Approved by (Department Representative) Effective Date