DECLARATION OF SPECIALIZATION AREA

DATE:		TOTAL HOURS EARNED:
STUDENT:		PID#: P
ADVISER:		TRACK:
CATALOG OF ENTRY (e.g. 2017-2018):		MONTH/YEAR EXPECTED GRADUATION:
EMAIL:		PHONE:
As the academic adviser for this student, I have approved the following:		
	Option 1: complete 21 semester hours in a single department other than Journalism, Media Arts & Studies, or Visual Communication (6 hours must be at the 3000 or higher level)	
[DEPARTMENT:	
<u>OR</u>		
E le	Option 2: complete 12 semester hours in a single department other than Journalism, Media Arts & Studies, Electronic Media, Communication (COM <u>M</u>) or Visual Communication (6 hours must be at the 3000 or high level) and 9 semester hours in any other department or an adviser – approved collection of related courses. The 9 hours must be a subject area other than Journalism.	
[DEPARTMENT 1:	
С	DEPARTMENT 2:	
*Note: Courses taken to fulfill specialization requirements can fulfill university Tier requirements but cannot count toward the school's general requirements.		
*List the specific related courses approved for the 2 nd specialization if they constitute an "adviser approved" area:		
	course:	course:
	course:	course:
	course:	course:
Notes:		
ADVISER'S	S SIGNATURE:	

Submit this form to the E. W. Scripps School of Journalism, Schoonover 223