

BA HONOURS with SUBSIDIARY

Honours _____ Subsidiary _____

Concentration (if applicable) _____

Student ID Number

Last Name

First or Preferred Name

E-mail

Phone

Date

NOTE: At least 36 credits of 300/400-level courses are required in the overall pattern.

HONOURS SUBJECT (Subject A) – 48 Credits

- | | | | |
|------------------------------------|------------------------------------|-------------------------------------|-------------------------------------|
| (1) <input type="checkbox"/> _____ | (2) <input type="checkbox"/> _____ | (9) <input type="checkbox"/> _____ | (10) <input type="checkbox"/> _____ |
| (3) <input type="checkbox"/> _____ | (4) <input type="checkbox"/> _____ | (11) <input type="checkbox"/> _____ | (12) <input type="checkbox"/> _____ |
| (5) <input type="checkbox"/> _____ | (6) <input type="checkbox"/> _____ | (13) <input type="checkbox"/> _____ | (14) <input type="checkbox"/> _____ |
| (7) <input type="checkbox"/> _____ | (8) <input type="checkbox"/> _____ | (15) <input type="checkbox"/> _____ | (16) <input type="checkbox"/> _____ |

SUBSIDIARY SUBJECT (Subject B) – 24 Credits

- | | | | |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| (1) <input type="checkbox"/> _____ | (2) <input type="checkbox"/> _____ | (5) <input type="checkbox"/> _____ | (6) <input type="checkbox"/> _____ |
| (3) <input type="checkbox"/> _____ | (4) <input type="checkbox"/> _____ | (7) <input type="checkbox"/> _____ | (8) <input type="checkbox"/> _____ |

PAIR SUBJECT (Subject C) – 12 Credits

- | | |
|------------------------------------|------------------------------------|
| (1) <input type="checkbox"/> _____ | (2) <input type="checkbox"/> _____ |
| (3) <input type="checkbox"/> _____ | (4) <input type="checkbox"/> _____ |

ELECTIVES – 36 Credits

- | | | | |
|------------------------------------|------------------------------------|-------------------------------------|-------------------------------------|
| (1) <input type="checkbox"/> _____ | (2) <input type="checkbox"/> _____ | (7) <input type="checkbox"/> _____ | (8) <input type="checkbox"/> _____ |
| (3) <input type="checkbox"/> _____ | (4) <input type="checkbox"/> _____ | (9) <input type="checkbox"/> _____ | (10) <input type="checkbox"/> _____ |
| (5) <input type="checkbox"/> _____ | (6) <input type="checkbox"/> _____ | (11) <input type="checkbox"/> _____ | (12) <input type="checkbox"/> _____ |

NOTES

FOR OFFICE USE ONLY

Chair of Honours Department

Date

Chair of Subsidiary Department

Date

Averages: Fresh _____ Soph _____ Junior _____

Approved

Not Approved

Dean

Date