



LANDER COLLEGE FOR WOMEN  
THE ANNA RUTH AND MARK HASTEN SCHOOL

A Division of Touro College

**Major Declaration Form**

**This form must be filled out and accompany your registration each semester**

PROGRAM / EXTENSION: <b>LAS WD</b>	FOR OFFICE OF RECORDS USE ONLY: Rec'd By _____ Date _____ Entered by _____ Date _____
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(PLEASE PRINT CLEARLY)

**Student Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 Maiden/Other Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth (City, State, Country) \_\_\_\_\_  
Month Day Year

**Race/Ethnicity**

**Gender:**  Male  Female

(optional – for statistical purposes only)

- American Indian/Alaskan Native  Asian or Pacific Islander  African American (Non-Hispanic)  
 Hispanic (regardless of race)  White (Non-Hispanic)  Other (please specify) \_\_\_\_\_

**Permanent Address**

Number and Street \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Day Phone # ( ) \_\_\_\_\_ Evening Phone# ( ) \_\_\_\_\_

**Current Address (if different from permanent)**

**Good Until:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Month Day Year

Number and Street \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Day Phone # ( ) \_\_\_\_\_ Evening Phone# ( ) \_\_\_\_\_

**Emergency Contact**

Parent  Guardian  Spouse  Other

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  
 Address (if different from yours) \_\_\_\_\_ Apt. # \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone # ( ) \_\_\_\_\_  
 Name of Employer \_\_\_\_\_ Business Phone # ( ) \_\_\_\_\_

**Major Declaration** (choose one – write the code and title in the spaces provided):

Code \_\_\_\_\_

Title \_\_\_\_\_

**Major Code**

**Title**

<b>BAC</b>	<b>Accounting</b>
<b>BPS</b>	<b>Biology and Physical Science-Interdisciplinary</b>
<b>BBI</b>	<b>Biology</b>
<b>BCH</b>	<b>Chemistry</b>
<b>BCM</b>	<b>Communications</b>
<b>BCS</b>	<b>Computer Science</b>
<b>BEC</b>	<b>Economics</b>
<b>BEG</b>	<b>English</b>
<b>BFI</b>	<b>Finance</b>
<b>BHE</b>	<b>Hebrew Language and Literature</b>
<b>BHS</b>	<b>History</b>
<b>BLA</b>	<b>Interdisciplinary Liberal Arts and Sciences: BA</b>
<b>BLS</b>	<b>Interdisciplinary Liberal Arts and Sciences: BS</b>
<b>BJS</b>	<b>Judaic Studies</b>
<b>BMG</b>	<b>Management</b>
<b>BMI</b>	<b>Management/Information Systems (MIS)</b>
<b>BMK</b>	<b>Management/Marketing</b>
<b>BMT</b>	<b>Mathematics/Actuarial Studies</b>
<b>BPL</b>	<b>Political Science</b>
<b>BPY</b>	<b>Psychology</b>
<b>BSC</b>	<b>Sociology</b>
<b>BES</b>	<b>Special Education</b>
<b>BCO</b>	<b>Speech and Communications</b>
<b>UND</b>	<b>Undecided</b>

**Concentration (if applicable, select one):**

**Speech**

**Education**

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***Signature***

*My signature below indicates that all information given in this application is true and complete to the best of my knowledge.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date