

Double Major Form

Students may complete the requirements for a double major/concentration while registered within the same faculty/school at AUB upon approval of the Faculty concerned (same degree structure). In such a case, a student will be granted one degree with a double major/at graduation. OSB students, who wish to graduate with more than one concentration, must complete 9 credit hours for each additional concentration.

All final admissions decisions depend on the overall quality of the eligible applicant pool and the number of available places in the faculty concerned for the semester in question. The applications are treated in terms of grade requirements similar to transfer applications across faculties/schools.

General Information

Students may apply for a double major/concentration after the completion of at least two regular semesters in the initial program.

1. Students must be in good academic standing to apply for a double major. Good academic standing means that the student is not on probation.
2. Double major application deadline is May 30 for the fall term, and December 1 for the spring term.
3. Students wishing to withdraw from a double major must do so in writing to the Registrar's Office and faculty concerned.
4. Applications must be submitted to the Faculty Dean's Office/Student Section offering the program of the double major.
5. Students will receive one diploma with both majors they completed at graduation.

ID number: _____ E-mail: _____ Mobile: _____

Last name: _____ First name: _____

Current major: _____ Faculty: _____

Double major: _____ Faculty: _____

Academic standing: _____ Overall average: _____ Credits earned: _____

To start Fall Spring Semester of the academic year: _____ / _____

Signature of Student: _____ Date: _____

Name of adviser in current major: _____

Signature of adviser in current major: _____ Date: _____

Recommendation of chairperson/coordinator dept. of double major: _____

Name of double major/academic adviser: _____

Signature of chairperson/coordinator: _____ Date: _____

Faculty / School Decision Approved Rejected

Comments: _____

Signature: _____ Date: _____

To be filled by the Registrar's Office only

Received by: _____	Date: _____
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Implemented by: _____	Date: _____
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Referred to: _____	Date: _____
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