University of California, Berkeley

College of Letters & Science
Office of Undergraduate Advising
113 Campbell Hall # 2924

PROGRAM PLANNING FORM

Name: _____ SID: _____
Last First Middle

Address: _____ Phone: ( )
Street City State Zip

Please check all that apply:

( ) Double major * ( ) Change of college into Letters & Science * ( ) Change of major *
( ) Simultaneous degrees * ( ) Readmission to: fall ___ spring ___ * ( ) Units exceed 130 *

Proposed major(s): _____ _____ _____

Expected graduation date: _____ Expected total units: _____

PROPOSED SCHEDULE OF CLASSES:
Beginning with the current term indicate all courses you plan to take, including those needed to complete major(s), college/school, and University requirements (see the *L&S Guide* for details).

Fall ____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

Fall ____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

Fall ____	Units	Spring ____	Units	Summer ____	Units
Total		Total		Total	

* REQUIRED SIGNATURE(S)

Major adviser* Date

Major adviser* Date