THEMATIC CLUSTER REGISTRATION FORM

Student Name: ________________________________
Student ID No.: ________________________________ Major: ________________________________

Check one:

_______ Declaring a Cluster
_______ Changing to a different Cluster

Check the Cluster you are now declaring:

_______ The Arts and Human Experience
_______ Cross-Cultural
_______ Perspectives on Global Environmental Issues
_______ Social Justice
_______ Values, Technology, and Society
_______ Women and Culture
_______ Catholic Intellectual Tradition
_______ Business Professional in a Global Society

*Honors and CORE students register for their cluster through the directors of those programs.

Student's Signature: ________________________________ (date)

Advisor's Name: ________________________________ (Please Print)

Advisor's Department: ________________________________

Advisor's Signature: ________________________________ (date)

Advisor: Deliver this portion to your department office.

Student's Name: ________________________________
Major: ________________________________ Date: ________________________________
Cluster Declared: ________________________________

Place this portion in the student's advisement folder.

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