

## San Diego Community College District **Major Electives**

	La City La 1	viesa 🗀 ivii	lidilidi		
			Multiple Degrees Other (specify below):		
Major and Area of Emph (PRINT)	asis:				
Name: (PRINT) Last Name	First	MI	Student I	D Number:	
Address:Street	City			State	Zip
Email:		Telephone	Felephone:		
	ow must be selected with a colle				
Subject & Course #		ge couriscie.			
(Example: HIST 100)	Course Title		Units	Institution (if other	er than SDCCD)
Counselor Name:				Date:	
,				Date:	
Department Chairperson: Ap (For 12 units Occupational Electives-Business Management only)				_ Approval Date: _	
. 0. 12 00 00125					
Evaluator Action:		L USE ONLY			
Reason:					
Signature:				Date:	