



# TOURO COLLEGE

Office of the Registrar

227 West 60<sup>th</sup> Street, New York, NY 11230 Telephone: (212)287-3500

## Major Declaration Form

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

	FOR OFFICE OF RECORDS USE ONLY: CIRCLE ONE : <b>WD</b>
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(PLEASE PRINT CLEARLY)

### Student Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 Maiden/Other name \_\_\_\_\_ ID# \_\_\_\_\_  
 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 \_\_\_\_\_  
 Day Phone # (    ) \_\_\_\_\_ Evening phone # (    ) \_\_\_\_\_

### Current Address (if different from permanent)

Good Until: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month Day Year

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

### Emergency Contact

Parent     Guardian     Spouse     Other

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

(Continued on reverse side)

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

Code \_\_\_\_\_

Title \_\_\_\_\_

**Major Code**

**Title**

**BAC**

**Accounting**

**BPS**

**Biology and Physical Science-Interdisciplinary**

**BBI**

**Biology**

**BCH**

**Chemistry**

**BCM**

**Communications**

**BCS**

**Computer Science**

**BEC**

**Economics**

**BEG**

**English**

**BFI**

**Finance**

**BHE**

**Hebrew Language and Literature**

**BHS**

**History**

**BLA**

**Interdisciplinary Liberal Arts and Sciences: BA**

**BLS**

**Interdisciplinary Liberal Arts and Sciences: BS**

**BJS**

**Judaic Studies**

**BMG**

**Management**

**BMI**

**Management/Information Systems (MIS)**

**BMK**

**Management/Marketing**

**BMT**

**Mathematics/Actuarial Studies**

**BPL**

**Political Science**

**BPY**

**Psychology**

**BSC**

**Sociology**

**BES**

**Special Education**

**BCO**

**Speech and Communications**

**UND**

**Undecided**

**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.*

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**SIGNATURE**

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**DATE**