

New York University • Department of Social and Cultural Analysis

41 East 11th Street, New York, NY 10003 • phone: (212) 992-9650 fax: (212) 995-4665

Africana Studies Program

COURSE PLANNING WORKSHEET

OLD Requirements for students who entered CAS or NYU PRIOR to Fall 2006

Advisor: _____
(last name)

Name: _____, _____ **NYU ID #:** N _ _ - - _ - - - -
(last name) (first name)

Course Requirements (Nine 4-point courses, 36 credits) Please note: courses were renumbered spring 06. Print out and complete **in pencil**. If you are unsure of when to take certain courses, leave blank.

Course Title	Course #	Semester Proposed	Semester Completed	Grade
1. Approaches to Africana Studies or approved substitute (see list)	V18.0101			
2. Africana History elective Course Title: _____				
3. Africana History elective Course Title: _____	Course #:			
4. Africana Social Science elective Course Title: _____	Course #:			
5. Africana Humanities elective Course Title: _____	Course #:			
6. Africana elective on any of the above or an African Language Course Title: _____	Course #:			
7. Africana elective any of the above or an African Language Course Title: _____	Course #:			
8. Africana elective Course Title: _____	Course #:			
9. Africana Senior Research Seminar	Course #:			

***Notes:** (Please list and explain any substitutions, exceptions, transfer credits etc.)

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Schedule by Semester Planning Worksheet

Name: _____ NYU ID #: N _ _ -- _ _ -- _ _ _ _
(last, first)

Local Address: _____ Phone: _____

_____ Cell (not required): _____

Major: _____ Email: _____

Expected Grad. Date: _____

Schedule by Semester – include only **future** semesters. Print out and complete **in pencil**. Bring to advising appointment and discuss with advisor. Must be signed by advisor for declaration and/or registration clearance.

Semester: _____

Semester: _____

Semester: _____

Semester: _____

Semester: _____

Semester: _____

Departmental Comments:

Advisor's Signature _____ Advisor's Name _____ Date _____

For Office Use Only - Cleared by (inits/date) : _____