

DECLARATION OF CONCENTRATION For BFA in Dance

Name _____ Phone _____
Last First Middle

Address _____
Number Street

City State Zip Code

College _____ Major _____

First UNLV enrollment: Sem ____ Yr ____ Current GPA _____ Date of Grad _____

Applying for Bachelor of Fine Arts degree

I hereby authorize the Registrar's Office to release my _____
academic records to the appropriate faculty committee. Student Signature Date

Faculty Signatures Verifying Action Taken

Ballet _____

Modern _____

Jazz _____

Chair _____

Action Taken by Committee

Approved _____ Date _____

Disapproved _____ Date _____

Comments: