



NYU Chemistry Department

Declaration of Chemistry/Biochemistry Major

Check One:

Chemistry, B.A. Chemistry, B.S. Biochemistry, B.A. GPH/Chemistry, B.S.

For Double Major: 1st Department _____ 2nd Department _____

Name: _____ NYU ID #: N _____

Local Address: _____

NYU E-Mail: _____ Local Tel.# : _____

Points Completed: _____ Year Matriculated into NYU: _____

Please Indicate: Fr ___ So ___ Jr ___ Sr ___ Transfer Student: Yes ___ No ___

Former CAS Advisor: _____

Career Plans (circle one field only):

- (1) Graduate School (2) Medical School (3) Dental School (4) Teaching
(5) Industry (6) Research (7) Other Health Profession
(8) Other (specify) _____

List Math, Physics and Chemistry courses taken or transferred:

Course # Course Title Date Taken Grade Where Taken

Student Signature

Date