Three Year Bachelor’s Degree Program Declaration for Current Hartwick Students

Please complete this form and return it, with your deposit, to Student Accounts, who will forward it to the Registrar’s Office. If you are a new Hartwick Student please contact admissions to apply.

Name: ________________________________________________________________ Date: _______________________________

Email address: ____________________________________ Phone (in case of questions): _________________________________

Hartwick ID #: _____________________________________ Anticipated Completion Date (month & year): ________________

Check the program you are interested in pursuing:

☐ Accounting*        ☐ Economics
☐ Actuarial Mathematics ☐ English
☐ Art History        ☐ Environmental, Sustainability, and Society
☐ Biology
☐ Business Administration ☐ French
☐ Chemistry        ☐ Geology
☐ Computer Science       ☐ Global Studies
☐ Creative Writing ☐ History
☐ Criminal Justice ☐ Mathematics**

☐ Nursing***        ☐ Philosophy
☐ Political Science
☐ Psychology       ☐ Public Health
☐ Religious Studies ☐ Sociology
☐ Spanish         ☐ Theatre Arts

*General Accounting degree (CPA possible in 4 years)
**Completion of AP Calculus or equivalent required for acceptance into the program
***Admission to the Nursing three-year degree program is based on additional criteria. Nursing program requires completion of two summer courses

The following terms and conditions apply:
• To enroll as a new student you must meet all required admissions criteria;
• To enroll as a current student, you must complete or have completed at least 40 academic credits by the end of your freshman year, or 80 academic credits by the end of your sophomore year and have a cumulative GPA of 2.000 or higher;
• You must submit the required fee to Student Accounts before this form is processed;
• You must adhere to the accelerated completion timeline outlined by the program you selected;
• You must remain in good academic standing while enrolled in the program. Failure to do so will result in your removal from the program.

________________________________________________________________________________________________________
Student’s Signature    Date

________________________________________________________________________________________________________
Advisor’s Signature    Date