PRESBYTERIAN COLLEGE
MAJOR CARD (JUNIOR & SENIOR YEARS)

Name: _____ **ID**: _____
Last **First** **Middle** **ID Number**

Expected Date of Graduation: _____

Degree sought: BS Major: Business Administration (BADM) Concentration: Accounting (B-AC)
ANY substitution to this program of study requires advanced written approval from the Department Chair and must be on file in the Registrar's Office PRIOR to completion of the substitution.

Courses required for major	Grade	S.H.	Q.P.	Courses required for major	Grade	S.H.	Q.P.
ACCT 203 Principles Financial Accounting		3					
ACCT 311 Intermediate Accounting I		3		**Select 3 hours from the following International Business Electives:**			
ACCT 312 Intermediate Accounting II		3		BADM 308 International Marketing		3	
ACCT 313 Intermediate Accounting III		3		ECON 318 International Trade		3	
ACCT 328 Cost & Managerial Accounting		3		ECON 320 Intl Social Entrepreneurship		3	
BADM 101 Quantitative Skills		3		ECON 326 Comparative Economic Systems		3	
BADM 299 Computer Appl for Business		2		ECON/PLSC 341 International Political Economy		3	
BADM 301 Business Law		3		International Business elective approved by department chair		3	
BADM 307 Marketing		3					
BADM 315 Management/Org Behavior		3					
BADM 332 Managerial Finance		3		**Select 6 hours from the following Accounting electives:**			
BADM 351 Operations Management		3		ACCT 335 Advanced Accounting		3	
BADM 352 Strategic Management		3		ACCT 336 Auditing		3	
BADM 400 Career Preparation Tools		1		ACCT 338 Government & Not-for-Profit Acct.		3	
ECON 205 Principles of Microeconomics		3		ACCT 340 Federal Income Taxation		3	
ECON 206 Principles of Macroeconomics		3		ACCT 342 Accounting Information Systems		3	
STAT 319 Business Statistics		4					
				Total Hours Required		**58**	

Catalog Year 2020-21: Students are subject to requirements applicable at the time major is declared.

Student signature _____ Date _____

Major Advisor signature _____ Date _____

If the student is a varsity athlete, this form must be signed by the NCAA Compliance Officer:
_____ Date _____