

Philosophy, Politics and Economics

DECLARATION FORM FOR THE PPE MAJOR

PLEASE FILL OUT THIS FORM COMPLETELY, PRINT IT OUT, AND RETURN IT TO THE PPE ASSOCIATE DIRECTOR IN PERSON

(Please make an appointment before coming: ppemajor@sas.upenn.edu)

Name:	
Local Address:	
Telephone Number:	
Email Address:	
Penn ID (on Penn Card)	
Social Security Number:	
Field of concentration within PPE:	
Is this a second major?	Yes / No
Dual degree?	Yes / No
Expected date of graduation:	

Below please list those course numbers that you have taken so far and plan to count toward the PPE major, as well as the grades you received in them.

Field of Concentration	Second Field	Third Field

PPE Associate Director: Sumantra Sen. OFFICE HOURS: (please check webpage)
312 Logan Hall, (215) 898-3026

Do not write below this Line

APPROVED _____ DENIED _____

SIGNATURE

DATE