COGNITIVE & BRAIN SCIENCE MAJOR CONCENTRATION FORM  
FOR STUDENTS WHOSE FIRST SEMESTER ON CAMPUS WAS 2014 OR EARLIER 
(To be submitted with your SIS degree advisement report)

Student Name: ___________________________ I.D. # __________________

Other Major/Minor: ______________________ (Note: submit a signed checklist with your advisement report for each major/minor.)

Please list Tufts courses by title. For transfer courses, list by title and add “T.” Indicate which courses are incomplete, in progress, or to be taken. Note: If substitutions are made for “to be taken” courses, it is the student’s responsibility to make sure the substitutions are acceptable.

1. PSY 9 __________________________________________

2. PSY 31 __________________________________________

3. PSY 32 __________________________________________

4. PSY 64 (cross-listed as PHIL 15/LING 15) __________

5. COMP 11 (or AP credit) ____________________________

6. COMP 15 __________________________________________

7. One course from each of the following three groups:
   a. PSY 11, 25, 26, 27, 28, 29, 103; CD 51 ____________
   b. COMP 131, 150BRR, 150CMCS (formerly 150MOD), 171 ____________
   c. PHIL 3, 33 or 103, 191-02; PSY 150 (LING 113/PHIL 111), PSY 151 (LING 112/PHIL 112), PSY 155 (formerly PSY 65) ____________

8. A total of four courses taken from at least two of the following groups (note that courses listed as options in both 7. and 8. may only be used to fulfill one, not both of those requirements; only one of these courses may be independent study or directed research):
   a. PSY 80, 91, 92, 103, 112, 117, 118, 121, 122, 123, 124, 126, 127, 129, 131, 139, 140, 142, 144, 145, 146, 148, 154, 191, 192, 199; ____________
   b. PSY 149, 150, 151, 152, 153, 155 (formerly PSY 65), 180; CD 145, 152, 155, 156, 177, 195, 243; ED 114 (LING/ML/GER 114); ____________
   c. COMP 86, 105, 131, 135, 150BRR, 150CMCS (formerly 150MOD), 170, 171, 193, 194; ____________
   d. PHIL 38, 114, 117, 126, 132 (PSY/ANTH 132), 133, 134, 170, 191-02; ____________

9. PSY 195 (as a senior) ____________________________

Advisor’s Signature __________________________________ Date __________________

Departmental Signature (from advisor’s dept.) __________________ Date ____________

Have you done independent or supervised research on campus or off campus? **Yes or No**
If yes: with whom? __________________ When? __________________

Revised: 3/1/16