

UNDERGRADUATE MINOR APPROVAL FORM

Office of the Registrar

INSTRUCTIONS BELOW

REGISTRAR'S USE ONLY

Date: _____ Student RIN#: _____

Name: _____
(Last) (First) (MI)

Phone: _____ Email _____

Class: _____ Curriculum: _____

Request Minor in: _____
(See list of minors, reverse side)

Term	_ _ _ _ _
Minor 1	_ _ _ _
Minor 2	_ _ _ _

Is this your **FIRST REQUEST** or a **REVISION**? (circle one).

****NOTE****

No course taken for a minor can be taken Pass/No Credit.
 No course which is required for a major can be used for a minor requirement
 No course which is required for one minor can be used for another minor requirement

Courses to be completed to satisfy requirements for a minor in this field:

COURSE SUBJECT AND NUMBER	COURSE TITLE	SEMESTER TO BE TAKEN	CHECK THOSE REQUIRED COLUMN A	ALSO REQUIRED	
				ANY OF THESE COURSES COLUMN B	ANY OF THESE COURSES COLUMN C
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

<p>If any substitutions are made in the above course work, a revised Minor Approval Form must be submitted. If the above course work is completed satisfactorily, the minor field will be recorded on this student's academic record. <u>The minor will not appear on the diploma.</u></p>	<p>_____</p> <p>Department Chairman of Minor Area</p> <p>_____</p> <p>Print Advisor's Name</p> <p>_____</p> <p>Advisor's Signature</p> <p>_____</p> <p>Advisor's Campus Address</p>
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PLEASE MAKE COPY FOR YOUR RECORDS

