

Minor Declaration Form

Student Name _____ ID Number _____

Minor: _____ Catalog Year: _____ Major Advisor: _____

Minor Courses

Course ID	Course Title	Required or Elective	Credit	Term	Instructor
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Student Signature: _____ Date: _____

Faculty Member in Minor Department _____ Date: _____
(Signature)

Date Filed in Registrar's Office _____ Processed by: _____