

PRINT FULL NAME	LAST	FIRST	MIDDLE	PRINT STUDENT ID
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COLLEGE/SCHOOL OF MAJOR	MAJOR	IF CESS: PROGRAM	MAJOR ADVISOR
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Minor Requested _____
 Is this your _____ First Minor _____ Second Minor _____ If second, then first is: _____

Prerequisite courses:
(if any)

COURSE#	COURSE TITLE	SEMESTER TAKEN/TO BE TAKEN
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List courses in minor field:
are all completed?

☐ yes
☐ no

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List courses remaining in minor field:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

INSTRUCTIONS:

1. Student completes form and gives to dean's office (dean responsible for minor).
2. Dean's office approves or disapproves.
3. If approved, forward to Registrar's Office for processing.
4. If disapproved, Dean's Office notifies student via Zoo email account.

Approved

Dean's Signature

Date