

Minor Declaration

(As of Summer 2009 Minor is not a requirement)

Date: _____

SS #: XXX-XX-____

First Name: _____

Last Name: _____

LAST NAME _____	FIRST NAME _____	STUDENT ID NUMBER _____
ADDRESS _____		TELEPHONE _____
CITY _____	STATE _____	ZIP CODE _____
HUNTER COLLEGE: e-mail account _____		

1. Complete the Minor declaration form with your Minor Department academic advisor.
2. All Minor selections must be approved by an Academic Department representative of the Minor Department.
3. Advisor(s): Please provide the appropriate Curriculum Code for the Minor.

DECLARATION OF A MINOR *(One transaction per request)*

Curriculum Code:

ADD *(please check one only)*

First Minor _____

Second Minor _____

DEPARTMENT _____

TITLE OF PROGRAM/MINOR _____ # OF CREDITS REQUIRED IN PROGRAM _____

DELETE

Department approval not required

APPROVED BY: _____ DATE: _____

DEPARTMENT STAMP

I, the undersigned, understand and accept the current Departmental requirements for the minor.

Student Signature

Date

You must adopt the current catalog's requirements at the time you declare, add or change your minor(s).

FOR INTERNAL OFFICE USE ONLY			
_____ Date Received	_____ Initial	_____ Date Processed	_____ Initial