The City University of New York

Office of the Registrar • Room 217 North • Phone: (212) 650-3995 • Fax: (212) 650-3632 http://registrar.hunter.cuny.edu

Minor Declaration

(FOR MATRICULATED STUDENTS IN BA CURRICULA ONLY)

LAST NAME FIRST NAME	E FIRST NAME		STUDENT ID NUMBER	
ADDRESS		 TELEPHONE		
CITY STATE	ZIP CODE	HUNTER COLLEGE: S-I	HUNTER COLLEGE: S-net account	
. Complete the Minor approval form with your Minor D	enartment academic advis	or		
All Minor selections must be approved by an Academi Advisor(s): Please provide the appropriate Curriculum	c Department representat			
		0		
DECLARATION	OF A MINOR (One transaction	on per request)		
Curriculum Code:				
		uni code.		
ADD (please check one only)	DEPARTMEN	DEPARTMENT		
☐ First Minor				
☐ Second Minor	TITLE OF PR	OGRAM # OF CR	EDITS REQUIRED IN PROGRAN	
☐ No Minor				
DELETE (please check one only)	APPROV	ED BY:	DATE:	
☐ First Minor				
☐ Second Minor				
□ No Minor		DEPARTMENT STAMP		
ne undersigned, understand that I will lose credits for co esponsible for them:	ourses not creditable towar	d the degree chosen, but	will be financially	
esponsible for them.				
Student Signature			 Date	
Note: BA-MA students must pay Graduate Tuition	Rate for Graduate cour	ses once 120 credits ha	ve been completed.	
You must adopt the current catalog's re	equirements any time you dec	lare, add or change your mir	or(s).	
	FOR INTERNAL OFFICE USE ONLY			

Last Name:

Date Received

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Date Processed

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