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Minor Declaration

(FOR MATRICULATED STUDENTS IN BA CURRICULA ONLY)

LAST NAME	FIRST NAME		STUDENT ID NUMBER	
ADDRESS			TELEPHONE	
CITY	STATE	ZIP CODE	HUNTER COLLEGE: S-net account	
All Minor selections mu	st be approved by an Acaden ide the appropriate Curriculu	Department academic advisor nic Department representative m Code for the Minor. N OF A MINOR (One transaction	e.	
		Curriculu	ım Code:	
ADD (please check one only)	DEPARTMENT		
 First Minor Second Min No Minor 		TITLE OF PROC	GRAM # OF CRI	EDITS REQUIRED IN PROGRA
DELET	${f E}$ (please check one only)	APPROVE	D BY:	DATE:
 First Minor Second Min No Minor 	lor		DEPARTMENT STAMP	
	nd that I will lose credits for (courses not creditable toward	the degree chosen, but	will be financially
e undersigned, understa esponsible for them:				

FOR INTERNAL OFFICE USE ONLY					
Date Received	Initial	Date Processed	Initial		

Date: