MINOR DECLARATION/CHANGE

Return this completed form to the Office of Student Advancement, Sears 340.

Declaration/change is not official until the information is recorded in SIS.

Part I: To Be Completed by Student	
Name:	
CWRU ID #: Network ID:	
Entered CWRU: Requirement Term: (semester, year)	Graduation Term:(semester, year)
Minor:	
Concentration/Sequence:	
Is this a change of minor? O No Yes, I am dropping the minor in	
Are you changing it from a major to a minor? ONO Yes	
Is this an additional minor? ONO Yes, my other minor is	
Student Signature:	Date:
Student Signature: Part II: Take this form to the Academic Representative to have y	
Part II: Take this form to the Academic Representative to have y	your minor advisor assigned.
	your minor advisor assigned.
Part II: Take this form to the Academic Representative to have y Minor Advisor Assigned: (Please print clearly) Academic Representative:	your minor advisor assigned.
Part II: Take this form to the Academic Representative to have y Minor Advisor Assigned: (Please print clearly) Academic Representative: (Signature)	your minor advisor assigned.
Part II: Take this form to the Academic Representative to have y Minor Advisor Assigned: (Please print clearly) Academic Representative: (Signature) Date:	your minor advisor assigned.

