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: (semester, year) Requirement Term: (semester, year) Graduation Term: (semester, year)
Minor:
Concentration/Sequence:
Is this a change of minor? O No O Yes, I am dropping the minor in
Are you changing it from a major to a minor?  ONO Yes
Is this an additional minor? O No Yes, my other minor is
Student Signature: Date:
Part II: Take this form to the Academic Representative to have your minor advisor assigned.
Minor Advisor Assigned:(Please print clearly)
Academic Representative:(Signature)
Date:
For Offical Use Only
Date: SA:
Date: UGS:

