

Minor Authorization / Change

Instructions

This form is to be used by undergraduate students who wish to complete a minor or minors. Minors must be approved by the minor advisor and should also be carefully reviewed by the student's program advisor. Upon successful completion of all specified coursework and the certification for the undergraduate degree, the minor will be recorded on the student's transcript. Minors are available to degree seeking baccalaureate students only, and cannot be added after the degree has been awarded. Minors are not listed on the diploma.

General Information Please Type	University ID Number _____ Term _____ Date ____/____/____
	Name _____ Last First Middle
	Academic Program _____ Academic Plan _____

Declaring a Minor	<i>A minor within a program of study allows for greater depth within a particular subject area. All minors require 15 units, 9 of which must not meet requirements of the student's major. Please review the options available and discuss your interests with your advisor.</i>																																											
	<table border="0"> <tr> <td>Minor _____</td> <td>Title _____</td> </tr> </table> <ul style="list-style-type: none"> <input type="checkbox"/> This is the student's first Minor. <input type="checkbox"/> Drop this previously authorized non-Liberal Arts Minor. <input type="checkbox"/> Drop this previously authorized Liberal Arts Minor, and replace with the following Immersion: Immersion code _____ Title _____ <input type="checkbox"/> This Minor will be in addition to a previously authorized Minor. <input type="checkbox"/> This Minor will replace a previously authorized Minor. Old Minor code _____ Title _____ <table border="0"> <tr> <td>CLASS NO.</td> <td>SUBJECT</td> <td>CATALOG</td> <td>SECTION</td> <td>UNITS</td> <td>COURSE TITLE / DESCRIPTION</td> </tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	Minor _____	Title _____	CLASS NO.	SUBJECT	CATALOG	SECTION	UNITS	COURSE TITLE / DESCRIPTION	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Minor _____	Title _____																																											
CLASS NO.	SUBJECT	CATALOG	SECTION	UNITS	COURSE TITLE / DESCRIPTION																																							
_____	_____	_____	_____	_____	_____																																							
_____	_____	_____	_____	_____	_____																																							
_____	_____	_____	_____	_____	_____																																							
_____	_____	_____	_____	_____	_____																																							
_____	_____	_____	_____	_____	_____																																							
_____	_____	_____	_____	_____	_____																																							

Student Confirmation and Signature	Important Note to Student: Current federal and state financial aid regulations do not permit extensions of aid eligibility due to the additional unique credits required. There are different eligibility requirements for federal, state and university scholarships, grant and loan programs. By signing below, the student is assuming the responsibility of meeting with his or her financial aid counselor to confirm the end date of eligibility in comparison with the date of anticipated degree completion.			
	<table border="0"> <tr> <td>Student: Print _____</td> <td>Email _____@rit.edu</td> </tr> <tr> <td>Sign _____</td> <td>Date _____</td> </tr> </table>	Student: Print _____	Email _____@rit.edu	Sign _____
Student: Print _____	Email _____@rit.edu			
Sign _____	Date _____			

Department Signatures	<table border="0"> <tr> <td>Minor Advisor: Print _____</td> <td>Email _____@rit.edu</td> </tr> <tr> <td>Sign _____</td> <td>Date _____</td> </tr> <tr> <td>Home Department Head Print _____</td> <td>Email _____@rit.edu</td> </tr> <tr> <td>Sign _____</td> <td>Date _____</td> </tr> </table>	Minor Advisor: Print _____	Email _____@rit.edu	Sign _____	Date _____	Home Department Head Print _____	Email _____@rit.edu	Sign _____	Date _____
	Minor Advisor: Print _____	Email _____@rit.edu							
Sign _____	Date _____								
Home Department Head Print _____	Email _____@rit.edu								
Sign _____	Date _____								
<p>The home department head will forward this completed form to the Registrar's Office for processing.</p>									

Registrar's Office Use Only	Date Received _____ Date Processed _____ Processed by _____
------------------------------------	---