

APPLICATION FOR INDIVIDUALIZED MINOR

A minimum of 12 semester hours in the minor must be completed <u>after</u> approval of the individualized minor. All University graduation requirements apply.

A minimum of 24 hours must be completed for the individualized minor.

Name			_ ID#	or SS#	
Campus Box		Major		Second Minor	
Home Address _	(#)	(street)	(city)	(state)	(zip)
Number of Hours Completed in Proposed Minor:		r:	Date		

- A. Name of Individualized Minor:
- B. Vocational Plans:
- C. List Proposed Courses and Credit Hours for this minor: (use additional sheet, if necessary)
- D. Rational for requesting this minor: (use additional sheet, if necessary):

E. Signatures of three professors who represent the disciplines chosen above and who reviewed this proposal:

Approval:	Academic Advisor	_ Date
	Department Chairperson	Date
	Registrar	_ Date