

REQUEST FOR A MINOR/CONCENTRATION

Name: _____

ID Number: _____

Current Major: _____

Date: _____

For CMMN and SOCI majors, list below the concentration you wish to pursue:

Concentration: _____

The student may pursue a maximum of two minors. List below the minor(s) you wish to pursue:

1st Minor: _____

2nd Minor: _____

Please list below any minor you wish to drop:

Minor: _____