

# Request to Declare or Change a Minor

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ ID: \_\_\_\_\_

In order to declare or change your minor(s), you must complete and return this form to the Center for Student Success. *Previously declared minors will not be removed unless indicated below.*

I wish to declare and/or remove the following minor(s):

Declare	Remove	
<input type="checkbox"/>	<input type="checkbox"/>	American Sign Language
<input type="checkbox"/>	<input type="checkbox"/>	Bilingual/English as a Second Language Education
<input type="checkbox"/>	<input type="checkbox"/>	Biology
<input type="checkbox"/>	<input type="checkbox"/>	Biotechnology
<input type="checkbox"/>	<input type="checkbox"/>	Black Studies
<input type="checkbox"/>	<input type="checkbox"/>	Chemistry
<input type="checkbox"/>	<input type="checkbox"/>	Coaching & Youth Sport Development
<input type="checkbox"/>	<input type="checkbox"/>	Computer Science
<input type="checkbox"/>	<input type="checkbox"/>	Criminal Justice
<input type="checkbox"/>	<input type="checkbox"/>	French
<input type="checkbox"/>	<input type="checkbox"/>	Gender Studies
<input type="checkbox"/>	<input type="checkbox"/>	Homeland Security
<input type="checkbox"/>	<input type="checkbox"/>	Latin American & Latino/a Studies
<input type="checkbox"/>	<input type="checkbox"/>	Mathematics
<input type="checkbox"/>	<input type="checkbox"/>	Museum Studies
<input type="checkbox"/>	<input type="checkbox"/>	Music
<input type="checkbox"/>	<input type="checkbox"/>	Physiology
<input type="checkbox"/>	<input type="checkbox"/>	Psychology
<input type="checkbox"/>	<input type="checkbox"/>	School Health Education
<input type="checkbox"/>	<input type="checkbox"/>	Spanish
<input type="checkbox"/>	<input type="checkbox"/>	Special Education
<input type="checkbox"/>	<input type="checkbox"/>	STEM (Science, Technology, Engineering & Mathematics)

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

**FOR OFFICE USE ONLY**

Entered in student record by:

Date: