

University of Massachusetts Dartmouth
North Dartmouth, MA 02747
Office of University Records

REQUEST FOR MINOR

DATE

NAME

STUDENT ID NUMBER

MAJOR

YEAR OF GRADUATION

I WISH TO ELECT A MINOR IN: _____

STUDENTS SIGNATURE

CHAIRPERSON OF DEPARTMENT OF MINOR

DEPARTMENTAL ADVISOR OF MAJOR

CHAIRPERSON OF DEPARTMENT OF MAJOR

RETURN COMPLETED FORM TO:

**UNIVERSITY RECORDS OFFICE
FOSTER ADMINISTRATION BUILDING/ROOM 103**

Revised 9/07