



## DECLARATION OF MINOR

STUDENT ID NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CURRENT MAJOR:** \_\_\_\_\_

☐ Associate of Arts

☐ Associate of Fine Arts

☐ Bachelor of Arts

☐ Bachelor of Fine Arts

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**NEW MINOR:**

☐ Cinematic Arts & Technology

☐ Creative Writing

☐ Community Wellness

☐ Indigenous Liberal Studies

☐ Interactive Arts & Gaming Design

☐ Museum Studies

☐ Native American Art History

☐ Performing Arts

☐ Studio Arts

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

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

**Advisor Signature:** \_\_\_\_\_

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

**Department Head Signature:** \_\_\_\_\_  
(MAJOR)

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

**Department Head Signature:** \_\_\_\_\_  
(MINOR)

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

**RETURN THIS SIGNED FORM TO THE REGISTRAR'S OFFICE.**