

Minor Declaration and Audit Form

Hobart and William Smith Colleges

10/01/2000

- Declaration Declaration form: to be completed upon first declaring a minor. Audit form: to be completed before entering the baccalaureate year.
- Audit

 Name (please print) ID# _____ Current Faculty Advisor _____

Major (if declared) _____ WS HO Anticipated Graduation Year _____

Check one: First minor
 Second minor
 Change of minor, old minor _____

Education interdisciplinary minor

interdisciplinary, 6 courses

At least 3 courses must be unique to the minor. All courses for the minor must be completed with a grade of C- or better. At least four of the six courses in the minor must be at the 300-level or above. The courses must be based on a theme grounded in education. Explain in the blank area below how these courses meet this requirement. Also note: Courses outside of education must be conceptually related to the education courses. Only one independent study may count toward the minor.

Check if unique	Check if completed	Planned semester	Course	Notes, substitutions, etc.
At least two courses in education:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	EDUC ____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	EDUC ____	_____
At least three courses outside of education:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
An additional course in education or another department or program:				
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

Comments:

Minor Certification

We agree that the successful completion of the program of courses indicated above will constitute an acceptable minor. (Compliance with uniqueness rules and other requirements will be confirmed by the Registrar.)

Student signature _____ Date _____

Minor Advisor (printed) _____

Minor Advisor (signed) _____ Date _____

Department or Program Chair signature _____ Date _____