Minor Declaration and Audit Form  
Hobart and William Smith Colleges  
09/25/2013

☐ Declaration  
☐ Audit

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

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

Major (if declared) _____________________________  
Anticipated Graduation Year _____________________________

Check one:  
☐ First minor  
☐ Second minor  
☐ Change of minor, old minor _____________________________

Public Policy Studies 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. No more than three courses may be taken in any one discipline. No more than one course with a CR grade may be counted toward the minor.

<table>
<thead>
<tr>
<th>Check if unique</th>
<th>Check if completed</th>
<th>Planned semester</th>
<th>Course</th>
<th>Notes, substitutions, etc.</th>
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</thead>
<tbody>
<tr>
<td>Two public policy core courses from two different divisions (humanities, social sciences, natural sciences):</td>
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One credit in skills courses. Note that some skills courses are a half credit.

| | | | | |
| Three 200-level or above courses forming a concentration selected by the student in consultation with an advisor in the program. Indicate concentration: _____________________________
| ☐ ☐ | | | |
| ☐ ☐ | | | |
| ☐ ☐ | | | |

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 _____________________________