



**University College**

**DECLARATION OF MINOR and/or CERTIFICATE PROGRAM**

Name \_\_\_\_\_ ID No. \_\_\_\_\_  
*Print: Last First MI*

I wish to declare the following under the \_\_\_\_\_ (current academic term) Catalog year:

**MINORS**

- \_\_\_\_\_ Business Administration
- \_\_\_\_\_ Communication Studies
- \_\_\_\_\_ Criminal Justice
- \_\_\_\_\_ Human Resources Management
- \_\_\_\_\_ Marketing
- \_\_\_\_\_ Organizational Leadership & Communication
- \_\_\_\_\_ Project Management
- \_\_\_\_\_ Public Relations

**CERTIFICATE PROGRAMS**

Note Credit (CR) or Noncredit (NC)

<b>Graduate Level</b>	<b>CR</b>	<b>NC</b>
_____ Executive Leadership	_____	_____
_____ Nursing Education		
_____ Nursing Leadership		
_____ Innovation/Social Entrepreneurship		
<b>Undergraduate Level</b>		
_____ Health Care Management		
_____ Organizational Leadership	_____	_____
_____ Project Management		

I WISH TO DELETE the following minor(s) or certificate program(s):

\_\_\_\_\_

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Advisor's Signature

\_\_\_\_\_  
 Date

\*\*\*\*\*Registrar's Office Use Only\*\*\*\*\*

Processed: \_\_\_\_\_  
*Initials                    Date*

# University College

## REDECLARATION OF MAJOR and/or MINOR

Name \_\_\_\_\_ ID No. \_\_\_\_\_  
*Print: Last First MI*

I wish to re-declare my major under the \_\_\_\_\_ (current academic term) Catalog year:

- \_\_\_\_\_ Business Administration                      \_\_\_\_\_ Nursing\*  
\_\_\_\_\_ Criminal Justice                                      \_\_\_\_\_ Social Work\*  
\_\_\_\_\_ Organizational Leadership & Communication

*\*Program requires admission approval*

I previously officially declared the following minor(s) and wish to retain this minor(s):

\_\_\_\_\_

I previously officially declared the following certificate program(s) and wish to retain this certificate program(s):

\_\_\_\_\_

\_\_\_\_\_ I have declared a **new** minor and/or a **new** certificate program **on the previous page.**

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Advisor's Signature

\_\_\_\_\_  
Date

\*\*\*\*\**Registrar's Office Use Only*\*\*\*\*\*

Processed: \_\_\_\_\_  
*Initials Date*