



Columbia College
Declaration/Change of MINOR
Evening College

Name _____ Columbia College ID No _____

Email _____ Telephone _____

Expected date of graduation _____ Semester _____ Year _____

Please check the **MINOR (S)** you are declaring or changing: Declaring Changing

Undergraduate Studies

- Gender, Women, and Leadership
- Leadership

Division of Arts and Communication Studies

- Communication

Division of Behavioral Studies and Human Inquiry

- American Studies
- History
- Organizational Leadership, Advocacy and Social Justice
- Psychology
- Religion
- Services to Children and Families

Division of Business, Mathematics, and Sciences

- Computer and Information Science
- Management
- Marketing

Students Signature _____ Date _____

Advisors Signature _____ Date _____

Division Head or Program Coordinator Signature _____ Date _____

If changing minor:
New Advisor _____

PLEASE RETURN THIS FORM TO THE OFFICE OF THE REGISTRAR
2nd floor of the Allison Administrative building