Columbia College

Declaration/Change of MINOR

Women's 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
- ☐ Art
- ☐ Art History
- ☐ Communication
- ☐ Dance
- ☐ Music
- ☐ Theatre

Division of Behavioral Studies and Human Inquiry
- ☐ African American Studies
- ☐ American Studies
- ☐ Ethics
- ☐ History
- ☐ International Studies
- ☐ Organizational Leadership, Advocacy and Social Justice
- ☐ Philosophy
- ☐ Political Science
- ☐ Psychology
- ☐ Religion
- ☐ Services to Children and Families
- ☐ Social Work

Division of Business, Mathematics, and Sciences
- ☐ Computer and Information Science
- ☐ Management
- ☐ Marketing
- ☐ Mathematics

Division of Languages and Literature
- ☐ Business and Professional Writing
- ☐ English Literature
- ☐ Journalism
- ☐ Public Relations Writing
- ☐ French
- ☐ International Studies
- ☐ Spanish

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