Minor Declaration and Audit Form
Hobart and William Smith Colleges
08/01/2017

☐ 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) ____________________________

Check one: □ First minor □ Second minor □ Change of minor, old minor ____________________________

WS □ HO □ Anticipated Graduation Year ____________________________

Education disciplinary minor disciplinary, 5 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. Among the 5 courses, two must be at the 100- or 200-level, two must be at the 300- or 400-level, and the fifth must be at the 200-level or above. Only one independent study may count 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>
</tr>
</thead>
</table>

At least two education courses at the 100- or 200-level:

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SOC 261 may substitute for one of these

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At least two education courses at the 300- or 400-level:

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WRRH 322 or DAN 335 may substitute for one or two of these

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One additional education course at the 200-level or higher. SOC 261, WRRH 322, or DAN 335 may also satisfy this requirement (unless already counted above):

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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 ________________