



SIMMONS UNIVERSITY
Office of the Registrar
300 The Fenway, Boston, MA, 02115
Tel 617.521.2111 Fax 617.521.3144
MINOR DECLARATION FORM

Name: _____ Simmons ID #: _____ Anticipated Graduation Date: ____/____/____
Month Year

Academic Policy:

You may declare a minor after you have declared your intended major.
To declare more than one minor, you must obtain the signatures of the chairpersons in each department.

Minor Track:

If you are declaring a minor in one or more of the following departments, please indicate your track:

Art • Arts Administration • Business/Management • Communications • Computer Science • Education

I am declaring my minor Yes No

If you are not declaring this minor for the first time, please check below what action you would like taken.

<u>1st Minor</u>	<u>2nd Minor</u>	<u>3rd Minor</u>
_____ Department Chair Signature	_____ Department Chair Signature	_____ Department Chair Signature
Print Last Name: _____	Print Last Name: _____	Print Last Name: _____
<input type="checkbox"/> Keep <input type="checkbox"/> Remove	<input type="checkbox"/> Keep <input type="checkbox"/> Add <input type="checkbox"/> Remove	<input type="checkbox"/> Keep <input type="checkbox"/> Add <input type="checkbox"/> Remove

Student's Signature: _____ Date: _____