

Earlham College

Minor Field of Concentration Form

Name: _____ ID _____

Drawer _____ Email _____ Planned Date of Graduation _____
(Month/ Year)

Minor Field of Concentration _____

I am changing my current major to a minor: yes ___ no ___

I am filing a double minor: yes ___ no ___ if yes, indicate other minor _____

Major Field of Concentration _____

Courses in Minor Field of Concentration

Plan to take:		Have Taken:

Approved _____ Date _____
(Department Convener)

_____ Date _____
(Student Signature)

_____ Date _____
(Academic Adviser Signature)

_____ Date _____
(Academic Adviser Print)

_____ Date _____
(Registrar's Signature)

Notes:

1. The deadline for declaring a **minor** is the end of the early-semester break of the spring semester of the senior year.
2. Student must declare their Major Field of concentration **before** declaring a minor.
3. Each department has a copy of its own requirements. Students should check with the department convener for their requirements.

Please return completed form to the Registrar's Office