

CAS SELF-DESIGNED MINOR PROPOSAL

Name of Applicant:			
Banner Number:			
Phone Number:			
E-Mail Address:			
Anticipated Graduation Date:			
Name of Academic Advisor:			
Name of Advisor for Self-Design	ned Minor:		
Title of Minor:			
Brief Description of Minor:			
self-designed minor 3. When minor is approform. 4. Submit this applicat appropriate division	designed minor advisor for approved by self-designed and minor put the CAS Associate	signed minor advisor, attach completed p roposal, with the appropriate signatures,	to the
the proposal to the I	Dean of the Coll	ege of Arts and Sciences or final approvadicating approval (or rejection) of your notes approval (or rejection). Signature of Minor Advisor	al and signature
Signature of Associate Dean	Date	Signature of Dean of College	 Date

Signature of Dean of College

of Arts and Sciences