

**Cathy Hughes School of Communications  
DECLARATION OF MINOR FORM**

**\*You must:**

Complete 18 credits to fulfill your minor requirements.

**Demographic Information**

Name: \_\_\_\_\_  
                                    **First                    MI                    Last**

Date: \_\_\_\_\_

ID #: \_\_\_\_\_

Major: \_\_\_\_\_

Classification:                      **FR      SO      JR      SR**

Email: \_\_\_\_\_

Student Signature: \_\_\_\_\_

<b>DO NOT WRITE IN THIS BOX</b>	
Academic Advisor: _____	Date: _____
<b>Printed Name</b>	
_____	Date: _____
<b>Signature</b>	
SOC Academic Advisor: _____	Date: _____