

Request to Add/Change/Drop the Minor
Office of Registrar, Box 4028, Clinton, MS 39058

Instructions:

- 1. Complete all areas in Bold.**
- 2. Turn in to the Registrar's office.**

Date: _____ **Name:** _____ **MC ID# 700** _____

Anticipated Date of Graduation: _____ **According to Requirements in Catalog Year:** _____

Degree: _____ **Major:** _____ **Advisor:** _____

Check Your Classification: **Freshman** **Sophomore** **Junior** **Senior**

Add/Change Minor To:

Change Minor From:

Program Code:

Program

Code: _____

Drop Minor: _____

Student Signature: _____

MC email or cell phone: _____

Office Use Only:

Entered By: _____ Date: _____

changeofminor form 2.7.14