



SAINT MICHAEL'S COLLEGE  
Office of the Registrar  
One Winooski Park  
Colchester, Vermont 05439  
Telephone: (802) 654-2571  
Fax: (802) 654-2690

## REQUEST FOR A MINOR OR A CHANGE OF MINOR

Student Name: \_\_\_\_\_

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

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

Graduation Year: \_\_\_\_\_

### CURRENT MAJOR

Current Major: \_\_\_\_\_ Current Advisor: \_\_\_\_\_  
Print Name

Current Advisor's Signature: \_\_\_\_\_

I understand that I must complete all requirements as designated by the department for a Minor, and achieve a 2.0 grade point average in the Minor in order to have it recorded on my transcript.

### ADD A NEW MINOR

New Minor: \_\_\_\_\_ Department Chair: \_\_\_\_\_  
Print Name

Department Chair's Signature: \_\_\_\_\_

### DROP A MINOR

Name of Minor: \_\_\_\_\_ Department Chair: \_\_\_\_\_  
Print Name

Department Chair's Signature: \_\_\_\_\_

PLEASE RETURN COMPLETED FORM TO THE REGISTRAR'S OFFICE, FOUNDERS HALL ROOM 112.