DEPARTMENT OF GEOGRAPHY Ph.D. MINOR APPLICATION

Student Name:		
University ID #:		
Student Doctoral Program: _		
Geography Minor Advisor: _		
Expected Graduation Date: _		
Campus Address:		
Phone #:	E-mail:	
Requirements for complet graduate seminar.	ing a MINOR in GEOGRAPHY: 9 credit h	nours, including one
Courses taken for MINOR:		
Course #	Name of Course	No. of Hours
	S NOT) (circle one) waive participation is exam in the students major degree progr	
Student Signature:	Date:	
Advisor Signature:	Date:	
Approved:Academic Advisor or	Date: r Chairperson of Geography Department	