



Request To Drop Minor

Minors will not be confused with personal majors, concentrations within majors, or directed studies.

I hereby request that _____ be removed as my minor program of study.

Student's Name: _____ Date: _____

Personal Reference #: _____ Campus: Biddeford Portland

E-mail Address: _____ Class: _____

Student's Signature: _____ Date: _____

Current Major: _____

Advisor's Signature _____ Date _____

As a courtesy, please contact the department offering the above mentioned minor that you are dropping it from your academic program.

Please Note: Return this completed form the Registrar's Office

For Office Use Only:	
Update Checklist _____	Update Grad Yr _____
Updated By: _____	Date _____