Minion Declaration Form

BOSTON UNIVERSITY COLLEGE OF FINE ARTS

To be filled out, signed, and returned to the Dean’s Office, room 230, CFA

Name______________________________

ID#________________________________

CFA Major________________________ Graduation Yr:_________________

E-mail Address______________________________

To: Department Advisor for Minor

This CFA student is pursuing a minor in ___________________________.
Please list the course work required to satisfy this minor, as discussed with the student.*

Course number and title must be listed along with semester taken

1.__________________________________________________________

2.__________________________________________________________

3.__________________________________________________________

4.__________________________________________________________

5.__________________________________________________________

6.__________________________________________________________

7.__________________________________________________________

__________________________________________

CFA Student Signature Date

__________________________________________

Minor Advisor Signature Date