**PROPOSAL FOR MINOR PROGRAM OF STUDY**

1. **School/College:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Department/Division:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Minor Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Proposed Effective Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_
5. **Which campus(es) will offer this program?**
6. **Program Description:**Provide a brief summary of the objective of the program.
7. **Program of Study/Requirements:**Include prefixes, numbers, and titles of required courses, as well as total credit hours (must be 15-18 hours). Include any residency requirements or grade requirements.

**8. Approvals:**

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Department Head Department Date

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Dean School/College Date