

REQUEST FOR CERTIFICATION OF MINOR

This form must be returned to B100 by the department via email to advising@soe.rutgers.edu.

Name _____ Grad Date _____
 Email _____ Eng'g Major _____
 ID# _____ Campus PO _____ Minor _____

Does the Department accept grades of PASS towards the Minor? _____

Course Name & # <small>(ie. Linear Algebra 01:640:250)</small>	Semester/Year <small>(ie Spring 08)</small>	Grade Req'd <small>(ie. C or better)</small>	Grade Recv'd

Student Signature _____

Note to students: This form must be completed and submitted to the departmental office at the beginning of the final semester of enrollment.

This section is to be filled out by the department

Last revised: 2/24/2017

This form must be returned to B100 by the department via email.
 By signing this form, you are verifying that upon completion of the semester, the student will have completed the minor.

Department Advisor (please print) _____

Department Signature and Date _____

Does the Department accept grades of PASS towards the Minor? _____

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