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|  | **Tai Wai Campus**  Tel No.: 2707 3111 |

**Declaration of Minor in Degree Studies**

Notes to Applicants

1. Please TYPE, PRINT and SIGN on the form, and then submit it to the College Office.
2. Students of a normative four-year self-financing degree programme are eligible to declare a minor if they are not studying in an exclusive major of the minor and have successfully completed the courses required for the minor or have already registered for the remaining required course(s) in this semester.
3. In the case that a student cannot complete all the courses required for a minor, he or she may still declare the minor if a substitute course approved by the Associate Dean of the Minor-offering Faculty has been taken in lieu of the required course.
4. To apply for graduation with Minor, students must submit this form in **February of Year 4 of their study**.

**Student Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Student Name: |  | Student ID No.: | |  | |
| Contact Phone No.: |  | E-mail: | @uowmail.edu.au | | |
| Programme: | Choose an item. | Faculty: | Choose an item. | | |
| Year: | 4 | Cohort (Year admitted): | | | Choose an item. |

**Declaration**

1. I apply to declare a Minor in Choose an item.
2. I have taken / will take the courses required by the minor.

|  |  |  |  |
| --- | --- | --- | --- |
| Course code | Course title | Core or elective course | Grade achieved |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |

1. I have taken / will take the following courses approved by the minor-offering Faculty to substitute the related required courses (if applicable).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Substitute course | | | Required course | |
| Course code | Course title | Grade achieved | Course code | Course title |
|  |  | Choose an item. |  |  |
|  |  | Choose an item. |  |  |

|  |  |  |
| --- | --- | --- |
|  |  | Click or tap to enter a date. |
| Signature of Student |  | Date |

**(FOR OFFICE USE ONLY)**

Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please pass this form to the **Academic Registry**.