

The College of New Jersey

Office of Records & Registration
P.O. Box 7718, Ewing, NJ 08628-0718
609-771-2141

APPLICATION FOR MINOR/REMOVAL OF MINOR *OR* COURSE OF STUDY

Name: Last: _____	First: _____	Middle: _____	ID# <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> (6 Digit PAWS ID)						
Phone: _____	TCNJ Email: _____		Major: _____						

MINOR/COURSE OF STUDY: _____

Year of Expected Graduation: _____

Please indicate if you are:

- Adding a Minor/Course of Study
- Changing a Minor/Course of Study From _____ to _____
- Removing a Minor / Course of Study

Signature of Student

Date

Signature of Minor/Course of Study Department Chair

Date

Please Note:

- **If you are Removing a Minor/Course of Study, the signature of the Minor/Course of Study Department Chair is not necessary.**
- **College policy requires that applications for minors must be submitted at least one semester prior to graduation!**
- **Only one course taken as part of a student's major may also be counted toward the student's minor.**