WOFFORD COLLEGE
MINOR DECLARATION

Return completed form to: Office of the Registrar, Dupre Administration Building, Fax 864.597.4019

Complete this form in consultation with the Department Chair who oversees the area you are declaring and then return it to the Office of the Registrar. Both myWofford and DegreeWorks will reflect your new declaration(s) once the form has been processed. Degree and minor requirements are outlined in the Wofford College Catalog.

Student Information

W# __________________ First Name ____________________ Middle Initial __ Last Name ____________________

Anticipated Graduation Date: __________________________

Please indicate if you are a(n): Athlete ☐ International Student ☐ Veteran ☐

I am: Declaring a minor for the first time ☐ Declaring an additional minor ☐ Changing my minor ☐

*To drop or “undeclare” a major, please visit the Registrar’s Office.

Minor Declaration Options:

Minors

Name of Advisor (assigned by Dept. Chair) _____________________________

Dept. Chair/Coordinator’s Signature _____________________________

Minor

Name of Advisor (assigned by Dept. Chair) _____________________________

Dept. Chair/Coordinator’s Signature _____________________________

Other (Concentrations & Interdisciplinary Programs)*

Concentration/Program _____________________________________________

Name of Advisor (assigned by Dept. Chair): _____________________________

Concentration/Program _____________________________________________

Name of Advisor (assigned by Dept. Chair): _____________________________

*Some Concentrations and Interdisciplinary Programs are only available to students pursuing a specific major. Please consult with your Department Chair or advisor.

Student Signature _____________________________ Date ______________

For Office Use only:

Received _____________________________ Date ______________