THE UNIVERSITY OF ARIZONA
COLLEGE OF SCIENCE
LUNAR & PLANETARY LABORATORY

Minor Program Approval

This form to be completed during student's second semester. Do not enter courses into Plan of Study and/or Transfer Credit Form before submitting this completed/signed form to Amy Brenton, Kuiper 321.

Name_____ **Date** _____

1. I intend to minor in:_____.

2. Minor requirement waived: _____.
PTYS GAAC Chair

3. Reason for waiving:_____

4. I intend to complete/apply the following courses (minimum of 9 units) to fulfill the PTYS departmental requirements for a minor area of study:

Course number	Course title	Units / Grade	Sem/Year completed	MS transfer units from?

Approved by:

_____
Minor Advisor (MUST SIGN FIRST AFTER REVIEWING COURSES) **Date**

_____
Minor Committee Member **Date**

_____
PTYS Graduate Coordinator (Amy Brenton) **Date**

_____
PTYS GAAC Chair (SIGN LAST) **Date**