



NEW YORK CITY COLLEGE OF TECHNOLOGY

Office of the Registrar

300 Jay Street, Brooklyn, NY 11201 Telephone : (718) 260-5800

DECLARATION OF INTENDED ACADEMIC MINOR

This form must be completed with the Academic Minor Coordinator and submitted to the Office of the Registrar. Please refer to the most recent version of the College Catalog to see the requirements for each academic minor. Upon receipt of the application, the Registrar will record the intended academic minor on the transcript. This does not certify the completion of the academic minor, but only notes that the student intends to complete the academic minor. The Registrar will verify the completion of the intended academic minor once the student files for graduation.

Student must submit the Declaration of Intended Academic Minor application by the graduation filing deadline listed on the academic calendar. Please note: Once a degree is conferred, academic minors cannot be applied to the academic record.

Student Information:	Semester for which applying:	Fall 20 _____	Spring 20 _____
EMPLID Number:	_____	Major:	_____
Last Name:	_____	First Name:	_____
		Middle Initial:	_____
Telephone #: () _____ - _____	City Tech Email: _____		

DECLARATION OF ACADEMIC MINOR PLAN

Note: To rescind a previous Declaration of Intended Academic Minor, use the Delete column below.

ADD	DELETE

I, the undersigned, am aware that it is in my best interest to consult with my faculty advisor and academic minor coordinator to select courses for my academic minor that may also fulfill bachelor's degree requirements. I understand that I may be financially responsible for courses required for my academic minor that are not creditable towards my bachelor's degree:

_____ Student's Signature _____ Date

In the absence of a written signature: submission of the form to your Academic Minor Coordinator using your campus email will suffice.

ACADEMIC MINOR DEPARTMENTAL USE ONLY

<p>_____</p> <p>TITLE OF ACADEMIC MINOR PROGRAM</p> <p>APPROVED BY: _____ DATE: _____</p> <p>Academic Minor Coordinator's Signature</p>	<p>DEPARTMENTAL STAMP</p>
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REGISTRAR USE ONLY

Approved: Denied: Registrar's signature: _____ Date: _____