



Application for Transcript Listing of Minor

Office of Advising & Registration

4th Floor, Dewar Union
Hartwick College
Oneonta, NY 13820
Tel: 607-431-4460; Fax: 607-431-4260

Name: _____ ID No.: _____ Date: _____

Class Year: _____ Minor Advisor: _____

Course #Title	Term	Grade	Credits	Honor Points
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total Course Credits: _____ Total Honor Points: _____ Minor GPA: _____
(Determine minor GPA by dividing honor points by total credits)

Other requirements by the department for the minor:

1. _____
2. _____
3. _____

I certify that this student has completed all departmental requirements for a minor in _____ and request that this minor be shown on the transcript.

Signature of Department Chair

Date

Alternate certification: I certify that this student, with satisfactory completion of courses listed above, will complete all departmental requirements for a minor in _____ and request that this minor be shown on the transcript.

Signature of Department Chair

Date