

**COLLEGE OF AGRICULTURAL SCIENCES
AND NATURAL RESOURCES**

REVISION OF MINOR¹

(Return completed form with appropriate signatures to the CASNR Dean's Office, 103 Ag Hall)
One form per minor request

Date _____ Name _____

ID# _____ Major _____

Lincoln Address _____ Zip _____

Lincoln Phone Number _____ E-Mail Address _____

Minor _____ as published in the year _____ College of _____ bulletin.
College of Agricultural Sciences & Natural Resources (Circle One) 12 hour minor 18 hour minor

College of Arts & Sciences (A&S) (Circle One) Plan A Plan B (two minors)

Please record the following courses as constituting a minor.²

| COURSE PREFIX | COURSE NUMBER | COURSE TITLE | CR. HRS. |
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Signature of Student _____ Date _____

APPROVED:

Advisor _____ Date _____

Minor Department² _____ Date _____

College Dean _____ Date _____

¹ Required if proposed courses differ from those listed in the UNL Undergraduate Bulletin.
² Changes in an approved minor are made with a **Substitution-Waiver Form** available in Ag Hall 103. When changing the courses in a minor, a representative of the Minor Department signs the **Substitution-Waiver Request Form** in place of the **Head, Major Department**.

- Copies to:
- Registration and Records (original)
 - Dean, College of Major
 - Minor Adviser
 - Adviser
 - Student