OFFICE OF THE REGISTRAR

INTENTION TO COMPLETE OR DROP A CERTIFICATE OR MINOR*

Banner ID#: ________________ -or- Email: ________________@dickinson.edu

I, ________________________, intend to complete the courses for the following:
(Students printed name)

Please indicate the Certificate or Minor you wish to drop: __________________________

Please check one for the Minor or Certificate you wish to add:

Minors
❑ Arabic
❑ Astronomy
❑ Creative Writing
❑ Film & Media Studies
❑ Italian
❑ Portuguese & Brazilian Studies
❑ Sexuality Studies

Certificates
❑ Army ROTC Global Preparedness
❑ CPYB
❑ Food Studies
❑ Health Studies
❑ Security Studies
❑ Social Innovation and Entrepreneurship

Student’s Signature: ____________________________ Date: ________________

Minor/Certificate Advisor Signature: ____________________________

Minor/Certificate Advisor Name: ____________________________ Date: ________________
(Please Print)

Department Chair/Certificate Coordinator Signature: ____________________________

Dept Chair/Cert Coordinator Name: ____________________________ Date: ________________
(Please Print)

*Intention to minor is reported ONLY for those areas where no major is available.

Important Note: Students who wish to minor in an area for which there is a major should contact the Department for specific information about minor requirements.

Minors are awarded upon graduation from the college and will be noted on a student’s official transcript at that time.

Registrar’s Office Use Only

SFAREGS: ____________________________
SGAADVR: ____________________________
Date Entered: ____________________________

Revised 10/19