

**DECLARATION OF MINOR IN NUTRITION**

Name: _____

Date: _____

UIN: _____

Major: _____

Email: _____

Expected Graduation Date: _____

Number of Required Semester Credit Hours of Nutrition in **MAJOR** (_____) _____**COURSE REQUIREMENTS**

COURSE	CREDIT HOURS
NUTR 202 or 203	3
NUTR 301	3
NUTR 400	1
For the remaining credit hours, select nutrition electives with at least six hours from 300-400 level	9
TOTAL	16 HOURS

*A minor in nutrition must be declared before the student has completed 90 semester credit hours.

Must have a C grade or better in ALL minor coursework

Student's Signature: _____

Date: ____/____/____

Reviewed and Approved:

Minor Department Authorized Approval Signature: _____

Date: _____

Phone: _____

Reviewed and Approved:

Major Department Authorized Approval Signature: _____

Date: _____

Phone: _____

[] Entered in COMPASS form SZAREGS on ____/____/____ by Major Department

Xerox copies to: Student's Dean, Student, Major Department and Minor Department