

Substitute a Minor Concentration in Lieu of a Minor

Date: _____

Name: _____ WSU ID# _____

Address: _____

Phone #: _____ E-Mail Address _____

Proposed Minor Concentration: _____

Course	Credit Hours	Sem/Yr	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- Concentration must consist of a minimum of 15-18 credit hours.
- The concentration should consist of a group of related courses in a designated field of study.
- Nine credit hours should preferably be upper division (exceptions may be approved).

Committee Recommendation _____Approved _____Not Approved

Comments: _____

Substitution/Waive Committee

Date