

UCI Veterans Services
Office of the Dean of Students
Declaration of Minor

Name: _____ Student ID: _____

Declared Minor: _____

Courses Required for Minor:

School	Course Number	Units	Office Use Only

I hereby declare the above stated minor and I understand that if I fail to complete the minor I will be decertified from those courses. Decertification of courses may result in overpayment.

Signature

Date