Election of Minor
Sales (20-21 hours)
2014-2015 Catalog

Name_____________________________ I.D. Number_____________________________

Planned Degree Completion Date:  Mo._______ Yr.________

Major: ______________________________

**Required Courses**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCT 211</td>
<td>Principles of Accounting I</td>
<td>3.0</td>
</tr>
<tr>
<td>BUS 111</td>
<td>Foundations of Business</td>
<td>3.0</td>
</tr>
<tr>
<td>BUS 234</td>
<td>Principles of Marketing</td>
<td>3.0</td>
</tr>
<tr>
<td>BUS 309</td>
<td>Introduction to Sales</td>
<td>4.0</td>
</tr>
</tbody>
</table>

Two courses selected from: BUS 322, 451, 453; COMM 344

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

Explain transfer, substitutions, or other irregularities:

Advisor Signature _____________________________ Date _____________________________

Department Chair Signature _____________________________ Date _____________________________

*I understand I have final responsibility for monitoring my graduation requirements.*

Student Signature _____________________________ Date _____________________________

Return this form to the Office of the Registrar