

Election of Minor
Peace Studies (18 hours)
2016-2017 Catalog

Name _____ I.D. Number _____

Planned Degree Completion Date: Mo. _____ Yr. _____

Major: _____

Required Courses

Do not write in shaded area

<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	PEAC 110 Introduction to Peace Studies	Hours 3.0
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Fifteen hours of electives approved by the Peace Studies Council:

<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	_____	_____
<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	_____	_____
<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	_____	_____
<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	_____	_____
<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>	_____	_____

Explain transfer, substitutions, or other irregularities:

Advisor Signature _____ Date _____

Program Director 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