*PLEASE PRINT* _____ ID # _____ A.C. BOX_____

LAST NAME, FIRST NAME MIDDLE NAME

# MINOR DECLARATION

FIELD OF THIS MINOR: EDUCATIONAL PSYCHOLOGY PLANNED ANTICIPATED GRADUATION DATE _____

CHECK THE TYPE OF MINOR YOU PLAN TO COMPLETE:

[X] **BASIC (completed by most students)** [ ] **Individually Designed Minor (must be accompanied by a completed petition form)**

**A minor consists of five (5) to seven (7) course credit units, approved by the department chair or program director. At least two (2) course credit units must be taken at Austin College from courses 200 level or above.**

**LIST BELOW ALL COURSES TO BE USED TO COMPLETE THIS MINOR: (**for transfer courses use that school's course numbers & titles)**

| COURSE NUMBER (e.g., BIOL 115) | BRIEF COURSE TITLE | AC CREDITS | IF A TRANSFER COURSE FROM WHICH SCHOOL ? | SEMESTER HOURS |
|---|---|---|---|---|
| PSY 101 | GENERAL PSYCHOLOGY | 1 | | |
| PSY 201 | RESEARCH METHODS | 1 | | |
| PSY 296 | LIFESPAN PSYCHOLOGY | 1 | | |
| ED 351 | TEACHER/LEARNER INTERATION | 1 | | |
| ED 475 | LEARNER, TEACHER & CURRICULUM | 1 | | |
| one approved course, e.g., PSY 220, PSY 330, PSY 355 | | 1 | | |
| | | | | |

**TOTAL AC COURSE CREDIT UNITS:** 6

OTHER REQUIREMENTS (IF ANY) FOR THIS MINOR: (not actually counted in total credits above – supporting course work required)

PSY 120 or MATH 120 or SSCI 120 IS A PREREQUISITE FOR PSY 201. ALL COURSES FOR ED PSYCH MINOR MUST BE TAKEN FOR A LETTERGRADE. CANNOT MINOR IN ED PSYCH AND MAJOR IN PSYCH. COURSES ARE LISTED IN THE BULLETIN AND ON THE PSYCHOLOGY DEPARTMENT WEBPAGE.

*** I understand I must complete a minimum of 34.00 undergraduate course credit units; satisfy core, breadth, and competency requirements; all requirements of each declared major and minor and any other requirements set forth by the college.

(Certain combinations majors/minors requirements may require additional credits.)

STUDENT'S SIGNATURE _____ DATE _____

MENTOR'S SIGNATURE _____ Box No._____ DATE _____

DEPT. CHAIR'S OR DIRECTOR'S APPROVAL_____ Box No._____ DATE _____

REGISTRAR'S OFFICE APPROVAL _____ Box No._____ DATE _____