

## Petition to the Committee on Studies



UNIVERSITY of ST. THOMAS

Major or Minor at other ACTC Institutions

UST Individualized Major or Minor

Follow the directions on the other side of this form.

Name		Student Identification #
Home phone	Work phone	UST Mail #
Address to which Committee letter will be sent (if different from campus address)		
<b>Major or Minor at other ACTC Institutions</b>		
<input type="checkbox"/> Augsburg	<input type="checkbox"/> Major -or- <input type="checkbox"/> Minor	Title _____
<input type="checkbox"/> Hamline	<input type="checkbox"/> Major -or- <input type="checkbox"/> Minor	Title _____
<input type="checkbox"/> Macalester	<input type="checkbox"/> Major -or- <input type="checkbox"/> Minor	Title _____
<input type="checkbox"/> St. Catherine	<input type="checkbox"/> Major -or- <input type="checkbox"/> Minor	Title _____
Signed by chair of appropriate department at the host institution:	Chair's name printed	Date
Adviser signature from UST faculty member in a closely related field:	UST faculty name printed	Date

<b>UST Individualized Major or Minor</b>		
<input type="checkbox"/> Individualized Major in _____		
<input type="checkbox"/> Individualized Minor in _____		
UST faculty adviser's signature	UST faculty name printed	Date

Student's Signature	Date
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