Plan of Study for the Designated Graduate Minor Submit to the Graduate School, 210 Jesse Hall.

Student name: (Last Name, First Name)			
(Last Name, First Name) Mizzou ID number:			
Designated Minor:			
Academic program:			
Degree (i.e. MS, MA, PhD): Major:			
Anticipated graduation date:			
(Term, Year)			
Consult the Graduate Catalog for a list of approved, design PROPOSED PLAN OF STUDY. List the course numbers, course titles, numbers the term the courses have been/will be taken. Students must have approved Deg (i.e. M1, S2 or D2) on file with the Graduate School.	er of crearee Plans	dit hours, and s of Study	
Course number Title	Hours	Semester/Year	Grade
Total Hours Minimum number of total hours ranges from 9-15 hours, depending on the minor.			
The program of study is approved as stated. Subsequent changes must be reported on a Program of Study Co	urse Substi	tution form.	
Student's signature Date Director of Graduate Studies	signatur	e Da	ate

Date

Dean of the Graduate School signature

Minor Coordinator's signature