



# Professional Minor Request Form

Graduate and Professional Registrar

## Student Information

APU ID Number: \_\_\_\_\_ Date: \_\_\_\_\_

Student Name: \_\_\_\_\_  
*First* *Last*

Have you filed an Intent to Commence and/or Graduate Form?  Yes  No

### Requested Service:

- |  |   |
|--|---|
| <input type="checkbox"/> Add Leadership Minor        | <input type="checkbox"/> Add Psychology Minor                   |
| <input type="checkbox"/> Drop Leadership Minor       | <input type="checkbox"/> Drop Psychology Minor                  |
| <input type="checkbox"/> Add Criminal Justice Minor  | <input type="checkbox"/> Add Alcohol and Drug Counseling Minor  |
| <input type="checkbox"/> Drop Criminal Justice Minor | <input type="checkbox"/> Drop Alcohol and Drug Counseling Minor |

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

## Department Endorsement

Endorsement:  Approved  Declined

\_\_\_\_\_  
*Program Director or Dept Chair Signature*

\_\_\_\_\_  
*Date*

## Registrar Use Only

Endorsement:  Approved  Declined

\_\_\_\_\_  
*Academic Records Counselor Signature*

\_\_\_\_\_  
*Date*

**Form can be submitted by Mail, Fax, or PDF to Email**

**Mailing Address:** Azusa Pacific University, Graduate and Professional Center, P.O. Box 7000, Azusa, CA 91702

**Telephone:** (626) 815-4570

**Fax:** (626)815-4545

**Email:** [GPCRegistrar@apu.edu](mailto:GPCRegistrar@apu.edu)

Copies: G/P Reg  Dept  Student