

The Ohio State University
College of the Arts & Sciences
School of Communication

Minor Program Form
Communication Minor

Name _____

Soc Sec No. ____ -- ____ -- _____ Tel. No. (____) ____ -- _____

Local Address _____

Minor : **COMMUNICATION**

College of Enrollment _____ Major _____

Expected date of graduation _____

Have you filed a degree application in your college office? Yes ___ No ___

<u>Course name and number</u>	<u>Hours</u>	<u>Final Grade</u>
Comm 200 Comm in Society	5	_____
Comm 240 Intro to Comm Technology	5	_____
Comm 320 Intro to Interpersonal Comm	5	_____
Comm 431 Strategic Communication Principles	5	_____
Comm 642 Mass Comm & Society	5	_____

Total 25

Signature of Faculty Advisor or College Counselor

Original _____

**PLEASE PRINT AND TAKE TO
UNDERGRAD ADVISING OFFICE IN 3033
DERBY HALL FOR VERIFICATION**

Revision _____

School of Communication 292-3400

Date