

SCHOOL OF FAMILY STUDIES

CENTER ON AGING AND HUMAN DEVELOPMENT

UNDERGRADUATE MINOR IN GERONTOLOGY APPLICATION

INSTRUCTIONS TO STUDENT: PLEASE PRINT INFORMATION REQUESTED AND SIGN WHERE INDICATED.

Name _____ PeopleSoft # _____

Permanent Address _____ Phone _____

Local Address _____ Phone _____

E-mail Address _____

The University of Connecticut campus at which you are currently registered _____

Number of credits you have earned _____

School/College _____ Dept. _____ Major _____

Expected Graduation Date _____

Signature of student _____ Date _____

Advisor's Name _____

Advisor's Signature _____ Date _____

Director of the Center on Aging & Human Development _____
Signature/Date

Please note:

Give 1 copy to the Academic Advising Center, FS 120, for your file.

Give 1 copy to the Center on Aging & Human Development, Director

Keep the original for your files

