Declaration of Doctoral Minor

Students pursuing a doctoral minor offered by the College of Public Health are expected to include their Minor Advisor in their Comprehensive Exam Committee. If you wish to declare a minor (options include **Biostatistics, Environmental Health Sciences, Epidemiology, Global Health, Health Behavior Health Promotion** and **Public Health**) for a doctoral degree, please complete the following form before completing one semester of minor course work, identify a Minor Advisor, meet with the director of the academic program that offers the minor (or the Associate Dean for Academic Affairs in the case of the Public Health minor), obtain original signatures, and submit to:

**Doctoral Programs Coordinator**

Office of Student Services & Alumni Affairs | Drachman Hall, Room A302

1295 N. Martin / PO Box 245033 | Tucson, Arizona 85724 | Phone: 520.626.2112

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| **Student Name** | **Student ID #** | |
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| **Mailing Address** | | |
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| **Phone** | **E-mail** | |
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| **Minor Subject** | **Minor Advisor Name** | |
|  |  | |
| **Minor Courses Proposed** | | |
|  | | |
| **Doctoral Major** | **Expected Graduation Date** | |
|  |  | |
| **Major Advisor** | **Advisor E-mail** | |
|  |  | |
| **Student Signature** | | **Date** |
|  | |  |
| **Major Advisor Signature** | | **Date** |
|  | |  |
| **Minor Advisor Signature** | | **Date** |
|  | |  |
| **Program Director Signature (or Academic Dean’s Signature for Public Health Minor)** | | **Date** |
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