The Ohio State University
Colleges of the Arts & Sciences

Physics Minor Program Form

Name_____
Last First Middle

OSU name.# :_____

Minor_____

Major_____

Undergraduate Minor Program of Study

Course name and number	**Credit Hours**	**Grade**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Hours _____

Student Signature Date

Advisor Signature major Program Date

Advisor Signature Minor Program Date