

**MINOR APPLICATION**  
Department of Classics  
University at Buffalo - 338 MFAC  
Buffalo, NY 14261  
(716) 645-0466  
(716) 645-2225 – Fax

**STUDENTS MUST SUBMIT A COPY OF THEIR UNOFFICIAL TRANSCRIPT ALONG WITH THIS APPLICATION TO THE CLASSICS DEPARTMENT.**

**Name:** \_\_\_\_\_

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

**Person #:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Concentration within the Minor:** \_\_\_\_\_

**Total UB Credits:** \_\_\_\_\_ **Total Transfer Credits:** \_\_\_\_\_ **Total Credits to Date:** \_\_\_\_\_

**Current GPA:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Accepted:** \_\_\_\_\_ **Provisionally Accepted:** \_\_\_\_\_ **Not Accepted:** \_\_\_\_\_

**Departmental Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date entered into HUB:** \_\_\_\_\_

**Date added to Listserv:** \_\_\_\_\_

**Comments:**

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