UNDERGRADUATE STATISTICS MINOR DECLARATION FORM
PLEASE PRINT or TYPE ALL INFORMATION

NAME: ___________________________ ____________________________
               LAST       FIRST       MIDDLE

KSU ID #: __________________________

KSU E-MAIL: ___________________________@students.kennesaw.edu

List any other names (preferred name or maiden name) used at KSU: __________________________

Expected Semester of Graduation: __________________________

CURRENT MAJOR: ____________________________ CURRENT ADVISOR: __________________________

☐ DECLARE ☐ CHANGE ☐ REMOVE

☐ Applied Statistics and Data Analysis
Contact Mr. Michael Frankel at mfranke1@kennesaw.edu for questions.

SIGNATURE OF STUDENT: ____________________________ DATE: __________________________
Note: Typed name in an e-mail submission serves as authorization for declare/change/add of DSAS minor.

NOTES: ______________________________________________________

____________________________________________________

Please return form to: Eileen Wirpsa, Department of Statistics and Analytical Sciences, Building 16, Room 209
OR: ewirpsa@kennesaw.edu

For Office Use Only
Minor Code: ____________________________ Minor Changed by: __________________________
Date Minor Changed: _______________ Added to DataBase: __________________________