

REQUEST TO REMOVE
Minor, Dual Major or Dual Degree

This form is to be used if you do not intend to complete the requirements for your Minor, Dual degree or Dual major

Return signed and completed form to Registrar's Office, Laffin Hall, Room 225

or return to Regoffice@farmingdale.edu

STUDENT INFORMATION

First Name: _____ **Last Name:** _____ **RAM #** _____

Primary Degree/Major: _____

Student's Signature: _____ Telephone # _____

SECTION I – To be completed if removing a Minor

List name of Minor to be removed: _____

MINOR Chairperson's Signature

(Print name) (Signature) Date: _____

SECTION II – To be completed if removing a Dual Major

List name of Dual Major to be removed: _____

DUAL MAJOR Chairperson's Signature

(Print name) (Signature) Date: _____

SECTION III – To be completed if removing a Dual Degree

List name of Secondary Degree/Program to be removed: _____

DUAL DEGREE Chairperson's Signature

(Print name) (Signature) Date: _____