

University Park PSY minor application form (updated 6/6/2008)

NAME _____ PSU ID _____

MAJOR _____ PSU email _____

This application is required in addition to or in place of the general University minor form. Students who have obtained their major adviser's signature on the general University form need not have that adviser's signature on this form, but must provide the adviser's name and campus address. **Research experience (294/494), internship (295/495), and independent study (296/496) courses do NOT count toward the minor.**

Required Courses	Semester ¹	Campus ²	Prerequisites ³	Alternative Methods Course ⁴
PSYCH 100			NONE	
PSYCH 301W ⁴ or PSYCH alternative _____				
200-level courses (6 credits)				
400-level courses (6 credits) ⁵				

NOTES

1. Semester – Enter semester taken or planned (e.g., Fall 2008)
2. Campus – Enter Penn State campus where course was/will be taken, or “TR” (transfer). *A minimum of 9 credits, including 3 credits at the 400 level, must be taken at University Park.* Note that transfer courses which do not appear with a specific Penn State number on your transcript must be individually approved on the basis of a syllabus submitted to the Psychology Advising Center.
3. Prerequisites – Prerequisites will not be waived for PSY minors, and must be listed here.
4. Alternative – Students who take one of the following research methods courses as part of their major may substitute a different PSYCH course for PSYCH 301W: BBH 310W, CAS 204, COMM 404, COMM 420, HDFS 310M, HDFS 312W, LIR 312. The form **must** list a total of 18-19 credits of **PSYCH** courses.
5. 400-level courses – Many 400-level Psychology courses are enrollment-controlled to allow Psychology majors the first opportunity to enroll. Listing a course here does **not** guarantee that you will be allowed to enroll in the course, and some courses will generally have very limited availability to PSY minors. The registrar's schedule of courses each semester lists the enrollment controls.

Student signature _____ Date _____

Major advisor _____ Date _____

PSY approval _____ Date _____