

San Jose State University
Department of Physics and Astronomy

PHYSICS MINOR FORM

Name: _____ SJSU ID: _____
 Last First Middle

Proposed Graduation Date: _____ Major: _____

Email: _____ Phone: _____

If a course is taken at another college (lower division only), please indicate the college and its course number in the space provided.

Course	College & Title	Units	Grade
PHYS 50		4	
PHYS 51		4	
PHYS 52		4	

Six units of upper division physics or astrophysics courses

Course	College & Title	Units	Grade
		3	
		3	

Note: The following upper division courses are excluded from the minor (ASTR 101, PHYS 123, and PHYS 166) or any upper division courses outside the physics department.

Advisor Approval: _____ Date: _____

Department Chair Approval: _____ Date: _____