



San José State
UNIVERSITY

Department of Linguistics
and Language Development
LINGUISTICS MINOR FORM

Name _____ ID _____

Home Address _____

Phone #: _____ Email: _____

Major: _____ Date Minor Declared: _____

Date Minor Completed: _____

Courses

<i>Department & Course No.</i>	<i>Title</i>	<i>Units</i>	<i>Grade</i>	<i>Semester Completed</i>
LING 101	Intro to Linguistics	3		
LING 111	Intro to Ling. Phonetics	3		
LING 112	Intro to Syntax	3		

Total Units 15

For LLD Department Use Only

Foreign Language Requirement

Satisfied by _____ Semester _____

Required Signatures:

Faculty Advisor _____ Date _____

Program Coordinator _____ Date _____