

College of Arts and Sciences

Melton Center for Jewish Studies: Jewish Oral History Minor

Name (last, first, middle): _____ e-mail: _____ Minor: Jewish Oral History

Expected Date of Graduation _____

Local Address _____ Phone: _____

Have you filed a degree application in the College Office? Yes No

If completing two majors, list both below and file a separate form for each

1. _____ 2. _____

Please note: No More than 6 Transfer credit hours/ EM hours are allowed

Part A: Modern Jewish History (3 Credits)

Semester Taken Grade

Part B: Holocaust Studies (3 Credits)

Part D: Oral History Method (3 Credits)

Part D: Electives (3 Credits)

* _____

Check whether this is: Original Revision

Name of College Advisor: Tommy Beyl
Signature of College advisor: _____

Phone: 292-6961
Date: _____

To declare a major in Jewish Studies please fill in your personal information on this form and E-mail it to beyl.1@osu.edu