ADVISING FORM: Undergraduate Minor in Latin American Studies

**Student Information**

Name (Last, First, Middle) ________________________________  UFID# ________________

Current Address __________________________________________ Phone __________________

Permanent Address __________________________________________

UF E-mail: ______________________________  Alternate E-mail: ______________________________

Major(s): ______________________________  Minor(s): ______________________________

Anticipated Graduation: ________________  New Freshman _____  Continuing Student _____

**Course Plan**

- **Courses Taken for the Minor**

<table>
<thead>
<tr>
<th>Course No</th>
<th>Course Title</th>
<th>Grade</th>
<th>Credit</th>
<th>Semester</th>
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<tbody>
<tr>
<td>LAS 4935¹</td>
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- 9 hours of courses with 100% Latin American Content. Check box if outside major.

|             |             |       |        |         |

- 3 hours of additional Latin American coursework.

|             |             |       |        |         |

- **Language Requirement:**

SPN 2240 _____  POR 3242/3 _____  HAI 2201 ________

Standardized Exam: __________  Oral Exam: __________

Spanish Speaker _____  Native / Heritage

Portuguese Speaker _____  Native / Heritage

Haitian Creole Speaker _____  Native / Heritage

Other _____  Native / Heritage

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¹ LAS 4935 may be repeated up to 3 times if course content varies. Spanish (2000+), Portuguese (3000+), and Haitian Creole (2000+) courses may count toward the certificate if they are not used to meet the language requirement.

² 6 hours must be outside of Major.

³ May include courses taken for the major and up to 9 hours of courses with partial Latin American content.
Other Information

Career Plans and Academic Interests:____________________________________________________

Study Abroad Interest:_______________________________________________________________

How did you hear about the program? (Circle all that apply)

Class Visit  Friend/Classmate  CLAS Advisor  Flyer/Advertisement  Other_________________

Meetings with the Undergraduate Advisor:

1. Date: ____________ Advisor Initials: ____________ Student Initials: ________________
2. Date: ____________ Advisor Initials: ____________ Student Initials: ________________
3. Date: ____________ Advisor Initials: ____________ Student Initials: ________________
4. Date: ____________ Advisor Initials: ____________ Student Initials: ________________
5. Date: ____________ Advisor Initials: ____________ Student Initials: ________________

Other Comments: