

Africana Studies Minor

REQUIREMENTS COMPLETION FORM

Student Name and ID _____

Email _____

Anticipated Graduation _____

Date Form Submitted/Requirements Met _____

I. Introduction to Africana Studies

_____ Engl/Hist 3350
(semester)

II. African American

(semester) (course #/title)

(semester) (course #/title)

III. Africa, Caribbean, Diaspora

(semester) (course #/title)

(semester) (course #/title)

Coordinator of Africana Studies, Dr. Stacy Boyd