Health Science Minor Protocol

The minor in health sciences is designed for undergraduate students from any discipline across the university who wish to expand and apply their understanding in key areas of public health. The minor is comprised of five courses, two of which are required (PHTH 1260: The American Healthcare System and PHTH 2350: Community and Public Health), to equal 20 semester hours in total.

1. Student must first declare their intention to become a Health Science minor before being placed on a waitlist for any Health Science restricted courses. This can be done by completing the Program of Study Petition form at the end of this document.

2. All signatures must be obtained from the Health Science Department before proceeding to the Bouvé Office of Undergraduate Student Services for processing. The student should contact Rebecca Stouff, Academic Program Manager (r.stouff@northeastern.edu) to have her sign in the New Secondary Faculty Advisor slot of the form. Once her signature is received, the student should go to the Bouvé Office of Undergraduate Services in 120 BK, who sign the form in the New Primary Advisor line and add the classification onto the student’s profile.

3. When Step 2 is completed, the Bouvé Office of Undergraduate Student Services will notify the Health Science Department that the student has declared. The Health Science Department will confirm this information via Banner and follow up with the student. As a confirmed Health Science minor, you may now request to be put on a waiting list for restricted Health Science courses.

4. At this point, the student will need to provide the information below in order to be placed on the waitlist for registration when Steps 1 through 3 above are completed.

   - Name
   - Today’s date
   - NU ID#
   - Course Name
   - Course Number and Section
   - CRN
   - Your intended year of graduation
   - Email and phone contact information

Priority will go to students in the minor once students in the major are registered. Health Science minors will be contacted after students in the major have ended their registration period. Health Science minors will have 24 hours to respond to the email notifying them of availability of a specific course and section. The student must also ensure that there is room within his/her schedule for the requested course. If this deadline passes the next student on the list will be offered the seat.
Health Science, Minor

Complete all courses listed below unless otherwise indicated. Also complete any corequisite labs, recitations, clinical, or tools courses where specified.

**Required Courses**

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>PHTH 1260</td>
<td>The American Healthcare System</td>
<td>(FL,SP,SM)</td>
</tr>
<tr>
<td>PHTH 2350</td>
<td>Community and Public Health</td>
<td>(FL,SP,SM)</td>
</tr>
</tbody>
</table>

**Elective Courses**

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete three of the following:</td>
<td>9-12</td>
</tr>
<tr>
<td>EXSC 1120</td>
<td>Introduction to Exercise, Fitness, and Health</td>
<td>(FL,SP)</td>
</tr>
<tr>
<td>HLTH 5450</td>
<td>Healthcare Research</td>
<td>(FL,SP)</td>
</tr>
<tr>
<td>HSCI 1106</td>
<td>Contemporary Issues in Nutrition</td>
<td>(FL,SP,SM)</td>
</tr>
<tr>
<td>HSCI 5230</td>
<td>Clinical Nutrition Applications in Health and Disease</td>
<td>(SP)</td>
</tr>
<tr>
<td>PHTH 1120</td>
<td>Society and Health</td>
<td>(SP every other year)</td>
</tr>
<tr>
<td>PHTH 2300</td>
<td>Communication Skills for the Health Professions</td>
<td>(FL,SP,SM)</td>
</tr>
<tr>
<td>PHTH 4120</td>
<td>Global Perspectives on Discrimination &amp; Health</td>
<td>(FL,SP)</td>
</tr>
<tr>
<td>PHTH 4511</td>
<td>Healthcare Management</td>
<td>(FL,SP)</td>
</tr>
<tr>
<td>PHTH 5202</td>
<td>Epidemiology</td>
<td>(FL,SP)</td>
</tr>
<tr>
<td>PHTH 5228</td>
<td>Advances in Measuring Behavior</td>
<td>(SP)</td>
</tr>
<tr>
<td>PHTH 5230</td>
<td>Global Health</td>
<td>(SP)</td>
</tr>
<tr>
<td>PHTH 5232</td>
<td>Evaluating Healthcare Quality</td>
<td>(FL)</td>
</tr>
<tr>
<td>PHTH 5234</td>
<td>Economic Perspectives on Health Policy</td>
<td>(FL)</td>
</tr>
<tr>
<td>PHTH 5240</td>
<td>Evaluating Scientific Evidence</td>
<td>(SP)</td>
</tr>
</tbody>
</table>

**GPA Requirement**

2.000 GPA required in the minor
Program of Study Petition

Part 1—Student Information

Name (Last) ___________________________________________ (First) _______________________________ NUID __________

Year of graduation ___________________________ Program __________________________________________

Current college __________________________________________

Local Address __________________________________________

City _____________________________________ State _____ Zip ________ Phone __________________________

Student’s signature ___________________________________ E-mail __________________________

Part 2—Purpose of Petition

☐ Change program to __________________________________ as of term _________________, year 20 __________

Use above line also for currently defined combined-major programs—see “Note on Combined Majors” above.

☐ Transfer to another college at NU, in program __________________________________ as of term _________________, year 20 __________

☐ Pursue a second major in __________________________

☐ Pursue a minor in __________________________

☐ Pursue a concentration in __________________________ (only if offered in conjunction with your major)

New graduation year (if applicable) __________________________ New pattern of attendance (if applicable) __________________________

Part 3—Signatures

Date of approval __________________________________________

New primary advisor—signature ___________________________ Print name __________________________

NUID (needed for FACT) __________________________

New secondary (faculty) advisor—signature ___________________________ Print name __________________________

NUID (needed for FACT) __________________________

Advising Office Use Only

Advising office representative must fill in information below for request to be processed.

Effective term: ☐ Fall ☐ Spring ☐ Summer 1 ☐ Summer 2 ☐ Year 20 __________

Program Code (see www.neu.edu/registrar/ref-udc-prog-maj-cnc.xls) __________________________

Pattern-of-Attendance Code (see www.neu.edu/registrar/ref-udc-oca-upd.pdf) __________________________

Year in Pattern (circle one): 1 2 3 4 5 6

Concentration Code (see www.neu.edu/registrar/ref-udc-prog-maj-cnc.xls) __________________________

Second Major Code (see www.neu.edu/registrar/ref-udc-prog-maj-cnc.xls) __________________________

Minor Code (see www.neu.edu/registrar/ref-udc-min.pdf) __________________________

Registrar’s Office Only

Received by ___________________________ Date __________________________

Processed by ___________________________ Date __________________________

6/29/2015