



MPA Concentration Declaration / Change Form

Student Name: _____

Student R#: _____ Date: _____

Students declaring a concentration for the first time should fill out Part A.
Students changing their concentration should fill out Part B.

Part A: Concentration Declaration

Healthcare Administration

Public Management

Environmental Policy & Administration

Non-Profit Management

Part B: Concentration Change

Current Concentration: _____

New Concentration:

Healthcare Administration

Public Management

Environmental Policy & Administration

Non-Profit Management

JD-MPA student please check here

Student Signature: _____ Date: _____