

DECLARATION OF INTENT TO COMPLETE A CONCENTRATION

Please complete this form in order to declare your intention to complete a concentration. The form should be submitted to the Undergraduate Program Director (Herter 611).

To be completed by student:

Student name: _____

Student ID: _____

Proposed area of concentration:

In the space below, briefly describe the intended focus of your concentration (theme, region(s), time period?) and your reasons for selecting it. If you have already identified courses that you hope to take (you need four in total) please also list them here:

Signature of authorized department representative: _____

Date: _____