

Area of Study Declaration Human Development and Public Sociology

Revised Date: 11/19/2020

Submission Instructions

Please sign, date, and return this form via email to RecordsUOR@UAGC.EDU or fax to the attention of your Academic Advisor. The appropriate fax numbers can be obtained from your Advisor. **This form should only be used by former University of the Rockies students.**

Student Information

First Name: _____ Last Name: _____ Student ID: _____

Phone: _____ Email: _____ Academic Advisor: _____

Acknowledgement and Declaration(s)

I understand that changing specializations or requesting an additional specialization may result in the reduction of applicable transfer credit and total earned credits towards the completion of my degree. A reduction in total earned credits may also result in a decrease in the amount of financial aid for which I am eligible. Adding an additional specialization to my degree may also result in an increase in total program cost. I acknowledge that I have discussed these implications with my Academic Advisor or the Registrar's Office (as applicable). I understand that I am responsible for reviewing, understanding and abiding by the requirements for this area of study in accordance with the current University of Arizona Global Campus Academic Catalog.

Master of Arts in Human Development

I am requesting to **REMOVE** a specialization in:

- Adult Development
- Gerontology
- Standard Program of Study

I am requesting to **ADD** a specialization in:

- Adult Development
- Gerontology
- Standard Program of Study

Master of Arts in Public Sociology

I am requesting to **REMOVE** a specialization in:

- Applied Sociology
- Medical Sociology
- Standard Program of Study

I am requesting to **ADD** a specialization in:

- Applied Sociology
- Medical Sociology
- Standard Program of Study

Acknowledgement

Students adding or removing concentrations understand the potential impacts to transfer credits and/or costs. Please see the Acknowledgements and Declaration(s) section above for more information.

Student Signature: _____ Date: _____