

Submission Instructions

Please sign, date, and return this form via email 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: _____ Advisor: _____

Acknowledgements 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 *Ashford University Academic Catalog*.

Master of Arts in Psychology

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

- Career Management and Counseling (CMC)
- General Psychology (GP)
- Sport and Performance Psychology (SPP)

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

- Career Management and Counseling (CMC)
- General Psychology (GP)
- Sport and Performance Psychology (SPP)

*Note: Doctoral-level students in PsyD, Sport and Performance Psychology (SPP) will need to speak with their Academic Advisor if they are interested in a different specialization.

Student Signature: _____ Date: _____