

Request for Changes to Program Admission Cycle



Date: _____ Name: _____

Program: _____

- Request (Select one): Open a New Admission Cycle for your program
 Extending the current cycle deadline
 Delete an Admission Cycle

Rationale (Student Success): (300 words)

Rationale (Enrollment Goals if you do this): (300 words)

This Area For Office Use Only

Approved **Not Approved**

Return this form to mforeha1@kennesaw.edu.

The Graduate College will respond to your request as received as soon as possible and a decision within 5 working days.