



Bagwell Request for Change of Concentration

Complete top portion only and email to gradcollegeforms@kennesaw.edu

Name:

KSU ID#

Program:

Effective Term:

New Concentration:

By signing and dating this form I am choosing the program concentration I wish to pursue. If I choose to change my concentration later, I understand that some courses may not count toward my degree, but all grades will be used in the calculation of my GPA.

Student Signature:

Date:

Program Approval

Bagwell Certification Officer Signature:

Date:

Approve Deny

Coordinator Signature:

Date:

Approve Deny

Bagwell College Association Dean Signature:

Date:

Approve Deny

Graduate College Signature:

Date:

Approve Deny