



Office of the Registrar
Ochre Court, Room 203
100 Ochre Point Avenue
Newport, RI 02840-4192
Tel: 401-341-2943 * Fax: 401-341-2996
sruregistrar@salve.edu

Graduate and Professional Studies ADD OR CHANGE OF CONCENTRATION

- You must have approval of the Graduate Program Director before submitting the form.
- Return this completed form to the Office of the Registrar.

Student Name: _____
Student ID: _____ **Phone:** _____
E-mail: _____

PROGRAM INFORMATION

- Current Program:** _____
- Add:** Concentration: _____
- Remove:** Concentration: _____
- Replace** Current Concentration: _____
with **new concentration:** _____

ACKNOWLEDGEMENT OF RESPONSIBILITY

- I have read, understand, and agree to complete the requirements for earning this concentration.
- I understand that adding a concentration may require additional semesters to complete my degree.
- I understand I must maintain a minimum 3.00 cumulative grade point average (GPA).

Student Signature: _____ **Date:** _____

Authorization

To be completed by the Graduate Program Director

- The student and I have discussed and reviewed all the requirements for earning a concentration in this program.

Graduate Program Director Signature: _____ **Date:** _____