



# Holy Apostles College & Seminary

*Cultivating Catholic Leaders for Evangelization*

## CHANGE OF DEGREE CONCENTRATION FORM

To complete a change of your degree concentration, please fill out the information below and submit it to the Registrar's office. Online Students should submit this [onlineregistration@holyapostles.edu](mailto:onlineregistration@holyapostles.edu). On-campus or residential students should submit the form to [registrar@holyapostles.edu](mailto:registrar@holyapostles.edu).

\_\_\_\_\_ requests a change to his/her Degree program or Concentration.

(Name of Student)

Original Degree and Concentration (e.g., MA Theology – Bioethics) \_\_\_\_\_

New Degree/Concentration being requested (e.g., MA Theology –Apologetics) \_\_\_\_\_

Date Request is being made: \_\_\_\_\_

Reason for Degree/Concentration Change (optional): \_\_\_\_\_

For students borrowing loans, you must confirm that you have discussed the financial impact of this change with the Financial Aid Department: (Please Initial and Provide Date you spoke with FA) \_\_\_\_\_

Prior to submitting this form, you must confirm that you have spoken to your academic advisor to discuss the consequences of this request with regard to courses that still remain to be taken and have been taken. (Please Initial and Provide Date you spoke with the Advisor) \_\_\_\_\_

Student's Signature:

Date:

Online Staff's signature:

Date: