



*Exploring Differences, Deepening Faith*

**MASTER OF ARTS  
DECLARATION OF AREA OF FOCUSED STUDY**

*To be declared no later than the completion of 24 credits.*

Please print:

Student Name: \_\_\_\_\_  
Last First M.I.

Social Security No. \_\_\_\_\_

Area of Focused Study: \_\_\_\_\_

Academic Advisor: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WHEN COMPLETED, PLEASE SUBMIT TO REGISTRAR FOR STUDENT'S PERMANENT FILE.

\_\_\_\_\_

**REQUEST FOR CHANGE OF ADVISOR**

If a change in academic advisor will be necessary due to the subject area of the student's *newly declared* area of focused study, please indicate below and submit this form first to the Dean of the Seminary, not the Registrar.

Change of Academic Advisor: \_\_\_\_\_ Requested \_\_\_\_\_ Not Requested

**TO BE COMPLETED BY THE DEAN**

New Academic Advisor: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_