



**Petition to Change MPH Concentration**

MPH students may submit a petition to change concentrations. Petitions, received by the appropriate deadlines, will be reviewed by the concentration leads. Students should understand that changes to their MPH concentration are not guaranteed and may have course registration, academic, and financial implications.

PID: \_\_\_\_\_ Name: \_\_\_\_\_

**Current** MPH Concentration: \_\_\_\_\_

**Desired** MPH Concentration: \_\_\_\_\_

Requested Effective term: \_\_\_\_\_

**Current Format:**  MPH@UNC  Residential  Asheville

**Request submitted and advising complete by:**

- July 1
- November 1
- March 1

**Approved Requests Effective:**

- September Term
- January Term
- May Term

**Attach the following to your request:**

- A cover letter outlining the reason for wanting to change concentrations
- A brief statement of purpose tailored to the new concentration
- A semester-by-semester plan of study outlining the MPH degree in the new concentration
- Any additional documents to support the request

By signing this petition, I acknowledge that I have read and understood the degree requirements for the requested MPH concentration. I understand that it is my responsibility to make appropriate course choices to fulfill my graduation requirements. Consequences of this concentration change may include but are not limited to; extending time in program, taking more than 42 total credits, additional tuition for additional credits, and changes in financial aid/funding eligibility.

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

**Current Concentration Acknowledgement of Change**

Does the student have funding through the concentration? Yes  No

Will this funding be continued if the concentration change is approved? Yes  No

Concentration Lead Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**New Concentration Reviewer Approval & Comments**

- Approve MPH concentration change
- Needs additional information
- Deny MPH concentration change

**If change denied, please explain:**

Concentration Lead Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Academic Affairs Approval**

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

*Associate Director*