colorado school of public health

GEP Global Epidemiology (AMC)

UNIVERSITY OF COLORADO
COLORADO STATE UNIVERSITY
UNIVERSITY OF NORTHERN COLORADO

Concentration/Campus Declaration Form

Please complete the following form **and attach an unofficial transcript** for the new Concentration Director to review. Please return completed form to the Office of Academic Affairs. Please note students can change home campus only once during their MPH career. All concentration and campus change requests will be considered on a space-available basis and are not official until they receive final CSPH approval.

Student Name:		Student ID Number:		
Current Campus:		Current Concentration:		
Conc	entration Change Effective Term (Semester/Year)			
	te specify intended route of action below: I am declaring my initial concentration I am requesting a concentration/focus area chang I am making a campus change from my original ca I am adding a second concentration and pursuing I am dropping one of my dual concentrations Please specify which one you are dropping	ampus o a dual	designation concentration option	
Please specify intended campus and concentration/focus area(s) below:				
	APE Animals, People, Environment (CSU)		EPD Epidemiology (CSU)	
BIS	BIS Applied Biostatistics (AMC)		GHD Global Health/Heath Disparities (CSU)	
СВН	CBH Community & Behavioral Health (AMC)	HSR	HMP Health Systems Mgmt Policy (AMC)	
GCB	GCB Global Comm & Behav Hlth (AMC)		HMP Online HIth Systms Mgmt Policy (AMC)	
CHE	CHE Community Health Education (UNC)	(GHS Global Hlth Systms Mgmt Policy (AMC)	
GCH	CHP Community Health Promotion (CSU)		LPH Online Leadership and Public Health (AMC)	
HAC	GCH Global Comm Health Education (UNC)	G	MCH Maternal & Child Health (AMC)	
ЕОН	EOH Environ & Occupational Health (AMC)		GMC Global Maternal & Child Health (AMC)	
GEO	GEO Global Envnmntl & Occup Hlth (AMC)		PHW Pop Mental Hlth & Wellbeing (AMC)	
EPD	EPD Epidemiology (AMC)		PMH Online Pop Mental Hlth & Wellbeing (AMC)	
EPD	EPD Online Epidemiology (AMC)		PNU Public Heatlh Nutrition (CSU)	

Student Signature	Date
Concentration/Program Director Signature (concentration you are exiting)	Date
Concentration /Program Director Signature (concentration you are entering)	Date
Dual Concentration/Program Director Signature (if applicable)	Date
Faculty Advisor Assignment: (should be entered by the Concentration Director):	

Please return form to: Office of Academic Affairs

 $\textbf{Email:} \ \underline{\textbf{ColoradoSPH.AcademicAffairs@cuanschutz.edu}}$