



The Graduate School
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THE GRADUATE SCHOOL CHANGE OF CONCENTRATION OR CATALOG FORM

Purpose: This form is to be used when a student changes their catalog, or changes a concentration.
The completed, signed form should be submitted directly to The Graduate School.

STUDENT ID NUMBER: _____ **HAVE YOU APPLIED FOR GRADUATION?** ☐ YES ☐ NO

NAME: _____
LAST FIRST M.I.

CONTACT INFORMATION: EMAIL: _____ PHONE: _____

CHANGE OF CONCENTRATION:

DEGREE PROGRAM: _____

CURRENT CONCENTRATION: _____

☐ CHANGED TO -OR- ☐ ADD

NEW CONCENTRATION: _____

CHANGE OF CATALOG:

Current Catalog: _____

New Catalog: _____

***NOTE:** A change in Degree Program requires a new Admissions Application through the Graduate School.

STUDENT SIGNATURE: _____ DATE: _____

AUTHORIZING SIGNATURE: (PROGRAM DIRECTOR) _____ DATE: _____

AUTHORIZING SIGNATURE: (GRAD SCHOOL) _____ DATE: _____