raduate School Form 25INT		☐ Request for New Concentration
Revised 11/12)		\Box Request for Revision of Existing Concentration
		\square Request for Deletion of Existing Concentration
		JE UNIVERSITY UATE SCHOOL
Request for a Concentration (Interdisciplinary)		
Heads of graduate programs may request allow a specialized area of graduate study		more concentration(s) be established within their majors, to ected on a student's final transcript.
Graduate Program (Major)		Major Code
Name of Interdisciplinary Program		
Effective Session: Fall Spri	ng 🗌 Su	ummer Academic year: 201 201
Degrees to which this concentration appl Master of Science Master of Arts Doctor of Philosophy Other Campus(s) at which this concentration apple		
Fort Wayne Indianapolis North Central West Lafayette		
Statement of the mission of the p concentration, the target audience listed, and the relationship to oth Focus of the research or profession.	proposed con e, the relation er concentration	m
 Currently enrolled or expected no 	umber of stu	mic rank, and departmental affiliation udents fit into and support the degree program. List only the courses
		or abilities, capacity to identify and conduct original research, itical thinking and problem-solving skills, etc.).
Recommended by:		Approved by:
Head of the Graduate Program	Date	Graduate School Dean (West Lafayette) Date
Academic Dean	Date	Concentration Code

Please submit this form to the Graduate School, PWL. An approved copy will be returned to the department and academic college/school at the campus recommending the request.

Contact person (& e-mail address) for questions regarding form

Date

Required Signature - Interdisciplinary Programs