



Master in Urban Planning Declaration of Area of Concentration

Name: _____

Email Address: _____

Expected Month/Year of Graduation: _____

I declare the following *Area of Concentration* in order to meet my degree requirements (*choose one*):

- Environmental Planning
- History and Theory
- Housing and Neighborhood Development
- International Planning
- Real Estate and Urban Development
- Transportation and Infrastructure
- Urban Analytics
- Urban Design
- Special Area**

I plan to take/have completed the following 12-units to satisfy the above declared *Area of Concentration*:

Course #	Course Title	Term/Year	Units #

For any course not pre-approved for the concentration, you are responsible for seeking approval from the concentration advisor(s) ***before*** declaring your concentration and ***before*** the add/drop deadline in your third semester. **No signatures are required unless you are declaring a *Special Area*.**

*If you are doing a *Special Area of Concentration*, you will need to identify your Concentration Advisor in addition to procuring both theirs and the Program Director's signatures before the deadline.

*Name of *Special Area of Concentration* Faculty Advisor: _____

*Signature of *Special Area of Concentration* Faculty Advisor: _____
Date

*Signature of Program Director: _____
Date