



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*):

- ☐ Environment, Climate, and Health
- ☐ Housing, Community, and Economic Development
- ☐ International and Comparative 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 preapproved for the concentration, you are responsible for seeking approval from the concentration advisor(s) *before* declaring your concentration and *before* the add/drop course selection deadline in your third semester. **Signatures are required only if you are declaring a *Special Area* (see below).**

*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: _____
(only required for students declaring a *Special Area*) Date

This form is due to the Program Coordinator by the add/drop course section deadline in a MUP's 3rd term