

CHANGE OF CONCENTRATION FORM – UG Pure & Applied, Statistics, Major and Minor Programs
Department of Mathematics and Statistics

This form is to be used to request a change in concentration for the following programs:

- Specialization in Pure & Applied Mathematics or Statistics;
- Major in Mathematics & Statistics or Joint Major in Data Science;
- Minor in Mathematics & Statistics.

To be considered, the following is required:

- ⇒ acceptable standing – assessment (AGPA) and cumulative GPA (CGPA) of 3.0 for a change to a Specialization or the Joint Major, 2.0 for a change to the Major, 2.0 for a change to the Minor;
- ⇒ at least 24 Concordia credits on record;
- ⇒ must have completed or have an exemption for Math 203, Math 204 & Math 205 prior to the request;

* Forms to change into other departmental programs are available in the Change of concentration/program section on the [Department's student advising webpage](#).

** If you are not a student in the Faculty of Arts & Science, you will have to request a degree transfer through your portal (go to [Change of concentration or degree transfer](#)).

Personal Information

Concordia I.D. #:	<input type="text"/>	E-Mail:	<input type="text"/>
Given Name:	<input type="text"/>	Family Name:	<input type="text"/>

Current Program of Study

<input type="checkbox"/> BA	<input type="checkbox"/> Honours	Department:	<input type="text"/>
<input type="checkbox"/> BSc	<input type="checkbox"/> Specialization	Concentration:	<input type="text"/>
	<input type="checkbox"/> Major		

Change Request

Requested change of concentration:

(Check the appropriate box)

- Specialization in Pure & Applied Mathematics
- Specialization in Statistics
- Major in Mathematics & Statistics
- Are you requesting a Double Major? Yes No
- Joint Major in Data Science
- Minor

Requested removal of concentration:

(Check the appropriate box)

- Specialization
- Major/Joint Major
- Is this part of a Double Major? Yes No
- Minor
- Other
- Concentration:

Change to be made effective in: Summer 20 Fall 20 Winter 20

Student's Signature: Date:

Please attach a copy of your Concordia student record to this form, and e-mail the completed form and documentation to ugrad.mathstat@concordia.ca.

FOR OFFICE USE

Advisor Name (Block letters):	<input type="text"/>	Date:	<input type="text"/>
Advisor Authorization:	<input type="text"/>	Change Granted:	Yes <input type="checkbox"/> No <input type="checkbox"/>