

MSBA Declaration of Concentration Form

Instructions:

Complete this form and return to the SBS Graduate Programs Office by:

Email: msba@suffolk.edu

Adobe Acrobat will only allow you to save a blank form. To save and store a completed form, go to **File and select **Print**. A 'Print' dialog box will appear. Select **Adobe PDF** from the 'Name' (PC) or 'Printer' (Apple) drop down box and click **OK** (PC) or **Print** (Apple). A 'Save As' dialog box will appear. Follow the save options as you would save any file.*

Mail 120 Tremont St. 5th Floor Boston, MA 02108

Walk-In: SBS Graduate Programs Office
120 Tremont St. 5th Floor
Boston, MA 02108
Monday–Friday, 8:45am–4:45pm

Date: _____

Student ID #: _____

Personal:

First Name: _____

Last Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Email: _____

Home Phone: () _____

Business Phone: () _____

Choose your degree program:

MSBA

MBA/MSBA

MSBA/MSA

MSBA/MSF

Please indicate the name of the concentration you wish to declare: (Accounting, Finance, Healthcare Management, or Marketing. NOTE if you are completing a dual degree you cannot complete a concentration in the same content area e.g. MSBA/MSA cannot complete an accounting concentration.)

Concentration: _____

MSBA Program Director's Approval: _____

Date: _____

Registrar Office Use ONLY

Completed by: _____

Date: _____

Start Term: _____