

Request for Changes to Program Admission Cycle



~~and~~ who will take care of this, as well as email and calling plans to communicate this change. (100

Rationale (Enrollment Goals): (100 words)

College Assistant Dean Signature: _____

This Area For Office Use Only

Approved

Not Approved

Return this form no later than 14 days in advance of a deadline change to kallran@kennesaw.edu.
The Graduate College will respond to your request as received as soon as possible, and a decision within 5 working days.