



DECLARATION OF SPECIALIZATION

MASTER OF PUBLIC ADMINISTRATION IN INSPECTION AND OVERSIGHT

Students must complete three courses in one of the specializations listed below, **including each course designated as required**. Dual specializations are permissible if the student has fulfilled the requirements of both specializations. One course can count as an elective for two specializations with approval from the program director. However, approval by the program director is not necessary to declare or to switch specializations.

Please consult the Graduate Bulletin for course listings and descriptions.

To be Completed by Student

First Name: _____ Last Name: _____

EMPLID: _____ Email Address: _____

Check the box of the specialization(s) that you would like to declare or switch into:

Specialization	Code
<input type="checkbox"/> Inspection and Oversight of Health Services	PADIHEALTH
<input type="checkbox"/> Independent and Contractual Inspection and Oversight	PADINDCIOV
<input type="checkbox"/> Organizational Assessment and Monitoring	PADISGORG
<input type="checkbox"/> Law and Inspection and Oversight	PADISGLIO
<input type="checkbox"/> International Inspection and Oversight	PADISGISP
<input type="checkbox"/> Investigation and Operational Inspection	PADISGINV
<input type="checkbox"/> Forensic Accounting	PADFORACCT

Student Signature (required): _____ **Date:** _____

Submit the completed form to the Jay Express counter OR to the Office of the Registrar.

For Office Use Only

Fall _____ Winter _____ Spring _____ Summer _____

Rec'd By: _____ Date Rec'd: _____
