Vanderbilt University Divinity School Declaration of Concentration

Submit with Registration for Fall II (MTS), for Spring II (MDiv)

name of student:		
degree program:1	master of divinit	ry
1	master of theolog	gical studies
anticipated term to be graduated: _		
concentration to be declared:		
What courses have you taken to date concentration, and based upon currintend to take?		
course title	semester	credit hours earned
What course will fulfill the praxis re	equirement for t	he concentration?
course title	semester	credit hours earned
name of academic advisor printed	– ——— signatu	re of academic advisor

Please return this form to Office 137H.