

FINAL SUMMER PRACTICUM INTENT FORM

- This form must be completed by summer-only degree students who wish to enroll in only their practicum in their final semester.
- Students may enroll in only practicum credits in summer and no other on-campus summer courses only if this is the last remaining requirement to complete their degree.

Last Name: _____

First Name: _____

Harvard ID: _____

Expected Grad Date: ____/____/____

Degree (select one): SM1 (Summer-Only) MPH (Summer-Only)Are you an international student? Yes No

Will you be a resident or non-resident* while enrolled in your practicum? *Non-resident definition: residing outside of the Boston metro area

 Resident Non-resident

Address while non-resident (you must inform the Registrar's Office of any changes in your address or phone number):

Phone Number: _____

Non-resident status requested:

From ____/____/____

To: ____/____/____

Explain reason for request (attach additional sheet if needed): _____

REQUIRED SIGNATURES: after completing all signatures, submit to the Registrar's Office via email registrar@hsph.harvard.edu.

Student's Signature: _____

Date: ____/____/____

Advisor's Approval: _____

Date: ____/____/____

Dept. Chair/Program Head Approval: _____

Date: ____/____/____

REGISTRAR OFFICE USE ONLY The above request was approved The above request was not approved for the following reason(s): _____

Registrar's Office Signature: _____

Date: ____/____/____