This Change Request within the MPH Form is for:
- Changing from MPH-45 summer-only to MPH-45 academic year (residential) or vice versa
- Changing from the MPH 45-credit program to the MPH 65-credit program or vice versa

To change only your field of study within the MPH program: No form required; email mph@hsph.harvard.edu
For other types of degree changes: Use the Degree Program / Department Change Request Form

Submit this completed form to the MPH Program Office, housed in the Office of Education, 677 Huntington Ave., Kresge G-29. For questions, contact mph@hsph.harvard.edu or 617-432-0090.

1. Personal Information

Name: ____________________________________________ Last (family) __________ First __________ M.I. __________
Harvard ID: ____________________________

2. Type of Request

☐ Change from academic year to summer-only  ☐ Change from summer-only to academic year

*Please include a brief paragraph describing the reason for this request and proceed to question # 5.*

☐ Change from 45-credit to 65-credit  ☐ Change from 65-credit to 45-credit

*Please proceed to question #3.*

3. Current MPH Degree Program (include if 45- or 65-credit)  Current Field of Study / Track (if applicable)

4. Intended MPH Degree Program (include if 45- or 65 credit)  Intended Field of Study / Track (if applicable)

5. Change to take Effect

☐ Fall Semester  ☐ Spring Semester  ☐ Summer Session

6. Intended Status/Course Load

☐ Full-Time Student  ☐ Part-Time Student  ☐ Summer-Only Student

- Part-time MPH-45 and MPH-65 students have up to three years to complete the requirements of the degree.
- The summer-only MPH-45 program is limited to the Clinical Effectiveness and Quantitative Methods (retired) fields of study only. Summer-only MPH-45 students may have up to three summers to complete the requirements of the degree.
- Students with an F1 student visa are not eligible for part-time programs.
7. Next Steps

7A. For students changing from MPH-45 summer-only to MPH-45 academic year (residential) or vice versa:

- Please submit this completed form, along with a brief paragraph describing the reason for this request, to the MPH Program Office, housed in the Office of Education, 677 Huntington Ave., Kresge G-29 or mph@hsph.harvard.edu (You do not need to submit a new statement of purpose or CV/resume).

7B. For students changing from the MPH 45-credit program to the MPH 65-credit program or vice versa:

- **Statement of Purpose and Objectives and CV/Resume**
  The statement of purpose and objectives should not exceed 600 words. In your statement, please describe the following, including why you are requesting to change from the 45-credit MPH to the 65-credit MPH or vice versa:
  
  a) Your academic and/or professional preparation for a career in public health
  b) Your focused interest in the MPH degree program and/or MPH field of study to which you are applying
  c) Your career plans upon completion of the program at the Harvard Chan School

  Note any relevant strengths and weaknesses in your background or in your ability to carry out your professional responsibilities. Do not underestimate the importance of this statement. It is your opportunity to inform the faculty reviewers of your qualifications, motivation and potential to make a contribution to the field of public health.

  **Email both your statement of purpose and an up-to-date CV/resume to mph@hsph.harvard.edu before scheduling a meeting with Anne Occhipinti, Assistant Dean for Professional Education, aocchipi@hsph.harvard.edu, to discuss your change in person.**

9. Student Signature

- I have discussed this degree program change with Anne Occhipinti and I meet the minimum requirements of my prospective degree program.
- If I am on a Harvard-sponsored visa, I have been in contact with the Harvard International Office. I understand the implications that this change will have and know if I need to submit documentation to change/extend my visa (in a process separate from this one).
- I understand that changing my program could impact my charges and/or financial aid package. I have been in contact with the Office of Financial Aid, if necessary.
- Any decisions are not final until approved by a representative of the CAD subcommittee.
- I give permission for the current and prospective program administrators to have access to my entire student file.
- I certify that the information presented in my application is accurate, complete and honestly presented.
- I understand and agree that any inaccurate or misleading information, as well as any omission of information, will be cause for the rescission of any offer of admission, or for discipline, dismissal or revocation of degrees if discovered at a later time.
- I understand that my application and any materials submitted with my application become the property of the Harvard Chan School.
- I understand that all email communications will be sent to my Harvard Chan email address only.

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**Student Signature**  
Date (mm/dd/yyyy)

Submit this completed form to the MPH Program Office, housed in the Office of Education, Kresge G-29.

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**Signature Indicating Approval Status – For In-Office Use Only**

**Required Background Met Using:**  
☐ Prior Degrees: (Please list) ☐ Work Experience: (Verified by MPH Program Office)

**Required Background Details:**

This change alters the student’s expected graduation date: ☐ Yes; new date: _______ ☐ No date change

☐ Approved  ☐ Not Approved

**Signature**  
Printed Name  
Date (mm/dd/yyyy)

*Signature confirms that required background has been met for the change and that the Assistant Dean for Professional Education and/or the Intended Field of Study Leader grants approval.*

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*Form is returned to the Admissions Office, 158 Longwood Avenue.*