



HARVARD
FAS Registrar's Office

FOREIGN LANGUAGE CITATION STUDY PLAN

HARVARD UNIVERSITY
FAS Registrar's Office
Smith Campus Center, Suite 450
1350 Massachusetts Avenue Cambridge, MA 02138
(617) 495-1543
enrollment@fas.harvard.edu

HARVARD COLLEGE

Family Name (Last): _____

Given Name (First): _____

Student ID: _____ **House:** _____

Field of Concentration: _____

Language: _____ **Expected Date Of Graduation:** _____

COURSES

Please list the four courses you plan to take to meet the requirements for a citation in the language indicated above.

1. _____ 2. _____

3. _____ 4. _____

Foreign Language Head Tutor/DUS Approval: _____

Allston Burr Resident Dean _____

Student's Signature: _____ **Date:** _____

PLANS CHANGE

If you change your plans and decide not to complete the requirements for a Foreign Language Citation, please inform the Foreign Language Head Tutor or your Resident Dean of the change.

PLEASE **EMAIL** FORM TO THE OFFICE OF THE REGISTRAR **at** enrollment@fas.harvard.edu

Registrar's Office Use Only Date Received: _____ Date Processed: _____ Initial: _____