HARVARD COLLEGE

OFFICE OF UNDERGRADUATE EDUCATION



UNIVERSITY HALL, FIRST FLOOR NORTH CAMBRIDGE, MASSACHUSETTS 02138

Rescission Form

The form should be turned in to the Registrar's Office at enrollment@fas.harvard.edu

| NAME | HUID |
|---|---|
| EMAIL (@college) | |
| CONCENTRATION: | HOUSE: |
| TELEPHONE: | YEAR ENTERED HARVARD: |
| degree that I was granted when Education requirements may cha | Advanced Standing, I will give up the 32 credits towards the bachelor' I activated Advanced Standing. I also understand that my General ange and that I may neither compete for nor receive more than once and the forwhich the eligibility is linked to a specific class standing. |
| My reason(s) for rescinding is: (example- pursuing concurrent master's degree): | |
| | |
| Student's Signature | Date |
| Allston Burr Resident Dean Signature | Date |