

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

HARVARD COLLEGE	
Family Name (Last):	
Given Name (First):	
HUID:	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	
3	4
Foreign Language Head Tutor/DUS Approval:	
Allston Burr Assistant 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 SUBMIT FORM TO THE OFFICE OF THE REGISTRAR. (SEE ADDRESS ABOVE)	
Registrar's Office Use Only Date Received:	Date Processed: Initial: