

## APPLICATION FOR ACADEMIC AND FINANCIAL CREDIT FOR GRADUATE WORK DONE AT HARVARD AS A SPECIAL STUDENT OR UNDER THE TAP PROGRAM

HARVARD UNIVERSITY FAS Registrar's Office Smith Campus Center, Suite 450 1350 Massachusetts Avenue Cambridge, MA 02138 (617) 496-9488 transcripts@fas.harvard.edu

## Instructions:

- After one term in the degree program, complete this form in its entirety and submit it along with an original, official transcript to your Department for review.
- Your Department Administrator will send a secure scan of the transcript and the approved application to The Registrar's Office via transcripts@fas.harvard.edu for

final approval and pro-	cessing		·							
<ul><li>Maximum allowable or</li><li>You will be notified by</li></ul>						ord.				
Last Name	Fir	st and Middle Name		Email						
Student ID # (HUID)	Ye	ar in Graduate Scho	ol	Department						
List the courses for which	you are apply	ring for graduate aca	demic credit:							
Institution(s) and Year(s) Atte	ended	Course Number	Course Title		Subjec	t Matter of Cou	ırse	Grade	Y/N	
To be a second to discuss of the	#- DOC (D:	4	> Ob -i b -f	in a contract to the Desire						
To be completed by the student's DGS (Director of Graduate Studies) or Chair before being sent to the Registrar's Office:  Please evaluate the content of the courses in question and indicate in the column above labeled "Y/N" which of the courses you approve before signing.										
DGS or Chair signature:						Date:				

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DGS or Chair signature:		Date:						