

## **PhD Secondary Field Application**

StudentName:	StudentHUID: _		
Secondary Field Department:			
Title of Secondary Field:			
List below the courses used in fulfillment of the Secon form documentation to indicate completion of addition		ents. Attach to this	
Course Title	<u>Grade*</u>		
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*Language courses taken SAT/UNS may not be use	ed toward a seconda	nry field.	
Name of Director of Graduate studies for secondary field			
DGS for secondary field signature	I	Date	
Name of DGS for student's department/program			
DGS for student's department/program signature	1	Date	
Student signature The department and student should keep a copy of		Date	
The department and student should keep a copy of	this form for your i	records.	

Email the completed/signed form to the FAS Office of the Registrar at enrollment@fas.harvard.edu. This form must be received no later than the degree application deadline for the degree. There are no exceptions to this deadline.