

Specialization Approval Request Form

Please complete the information below and obtain approval from your Academic Advisor and your Program Director. Submit the completed form to Michelle Frankfort at michelle.frankfort@tufts.edu or drop-off to the Friedman Office of Student Affairs, Jaharis, Room 123 so your fulfillment of this degree requirement may be officially added to your SIS academic record/transcript.

Important to Note: A Specialization must consist of **at least three credits of coursework**. Additionally, only one of the credits may be a required course and only one of the credits may be a Directed Study course (and for the AF&E Specialization you may also include your Skills course). Courses taken outside of the Friedman School, including approved transferred courses, may be used for the Specialization.

Name: _____ **Student ID#:** _____

Degree Program: _____
(Indicate above if you are a MS or PhD student in the AF&E, BMN, FPAN, or NCBC degree programs.)

Proposed Specialization Title: _____

Course (e.g., NUTR 0217)	Course Title	Credit	Semester/Year

_____ **Date:** _____
Academic Advisor Approval

_____ **Date:** _____
Program Director Approval

*Please submit completed form to the Friedman Office of Student Affairs,
Jaharis, 123, 150 Harrison Avenue, Boston, MA*