



# Harvard University Extension School

Division of Continuing Education

Registrar's Office, 51 Brattle Street, Cambridge, Massachusetts 02138-3722 • Fax: (617) 496-4181

## 2009-10 ALM Thesis Continuation Registration Form

Master of Liberal Arts (ALM) candidates are considered full-time students at the Extension School in all terms in which they are registered for thesis work within their approved thesis completion timeline. This includes the term of your initial thesis registration and all subsequent terms in which a.) you continue your work according to the thesis completion schedule approved by your ALM program and b.) you submit this ALM Thesis Continuation Registration Form and are officially registered. **Please complete this form and submit it to the Registrar's Office by mail or fax, (617) 496-4181, by the appropriate fall or spring registration deadline** for your registration to be processed and for you to be enrolled full time in the associated term. Please note that there are no tuition or registration fees for this registration, and it will not show on your transcript. Submission of this form is required by the Registrar's Office for compliance with enrollment certification policies, and does not affect your thesis completion deadline.

Please print clearly.

Legal name (as it appears on your passport)		
Last (family name)	First	Middle
DCE ID number (if known)		Date of birth (example: JUN 09 1990)
@ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
(see <a href="http://www.extension.harvard.edu/login">www.extension.harvard.edu/login</a> if unsure)		Month (mm)      Day (dd)      Year (yyyy)
E-mail address		Daytime phone number (including area code) <input type="checkbox"/> Check box if cell
<input style="width: 100%;" type="text"/>		<input style="width: 100%;" type="text"/>
Degree program		
<input style="width: 100%; height: 20px;" type="text"/>		
Thesis title		
<input style="width: 100%; height: 20px;" type="text"/>		

With my signature, I confirm my continuing thesis work in the term below and I authorize my registration in the course below. I understand that my registration requires approval from my program and does not affect my thesis completion deadline.

Term	Course number	Title	CRN	Credit status	Credit value	Tuition
<input type="checkbox"/> Fall 2009	ALM E-499B	ALM Thesis, Continued	13279	GR	0	\$0.0
<input type="checkbox"/> Spring 2010	ALM E-499B	ALM Thesis, Continued	23094	GR	0	\$0.0

Student signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only**

Registrar's office \_\_\_\_\_

Program approval \_\_\_\_\_ Date \_\_\_\_\_

SFS \_\_\_\_\_ Date \_\_\_\_\_