

**Winter Session Activity Agreement**

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| Student Name & Area of Interest: | Program & Area of Interest: |
| Degree Entry Year: | What year are you? |
| **Please describe your planned Winter Session activities. Be specific; include course numbers (if applicable), whether activity is for credit or not for credit, location and time frame for each activity. Acceptable activities might include winter session courses, tutorials/independent study projects (with faculty members who are willing to take these on), travel tutorials, field placements, practica, community service projects, courses organized and taught by students, and skill-building workshops sponsored by administrative departments of the school. Approved activities need not be located on campus, or even in the United States.** | |
| **Describe how this activity will enhance your public health training and/or capabilities.** | |
| This contract should be submitted to the Epidemiology office **K901 by December 4, 2017.** *Please follow guidelines established by the Registrar’s Office for course registration. Digital copies to* [*edigiova@hsph.harvard.edu*](mailto:edigiova@hsph.harvard.edu) | |

Student Signature\*: Date:

Advisor Signature\*: Date: