Transcript Reconciliation for BA/BS HCOM Students

Name: ___________________________ Student ID: __________________

Please complete this form, and return it with your Degree Sheet to the Registrar’s Office for Public Health and Professional Degree Programs via scanned copy PHPDRegistrar@tufts.edu or by fax 617-636-0898.

As undergraduates, students in this combined degree are required to take 4 courses towards the MS-HCOM degree:

- Community Health: Introduction to Community Health
- Changing Health Behaviors
- The Science and Practice of Medicine
- Social Media and Health

**Only three courses will be listed on the MS-HCOM transcript as transfer credits. The grades attached to these courses will not factor into the overall MS-HCOM GPA.

Students should complete Table 1 to include the grade and semester taken for the two courses listed below that will double count towards both the BA/BS and MS-HCOM degree here:

### TABLE 1

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credits Earned</th>
<th>Grade</th>
<th>Semester Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>CH 0099</td>
<td>Special Topics in Community Health: Changing Health Behaviors</td>
<td>1 cr</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>CH 0107</td>
<td>The Science and Practice of Medicine</td>
<td>1 cr</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>

Students should complete Table 2 to include the grade and semester taken for the course that will count towards only the MS-HCOM degree here:

- This course may not count toward any undergraduate requirement and will not be part of the total undergraduate credits or the undergraduate GPA.

### TABLE 2

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credits Earned</th>
<th>Grade</th>
<th>Semester Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>CH 0099</td>
<td>Special Topics in Community Health: Social Media and Health</td>
<td>0.5</td>
<td>0.5</td>
<td></td>
</tr>
</tbody>
</table>

Student Signature ___________________________ Date: ____________

Undergraduate Advisor Signature (verifies the course in Table 2 do not count toward undergraduate degree) ___________________________ Date: ____________

BHCOM Track Director Carolyn Rubin ___________________________ Date: ____________

Date Processed by Registrar: ____________

Last updated: 7/23/15