**Please Circle**:  **I do I do not waive any right of access I may have to this reference form.**

**Student signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name: ­­­­­­­­­­­­­­**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STATEMENT OF PROSPECTIVE FACULTY ADVISER**

As prospective Faculty Adviser, your support is, apart from the student's own commitment, the most crucial factor in the success of a Special Concentration. Students who elect Special Concentrations forego the support as well as the constraints of a department; you therefore will bear substantial responsibility for their education.

1) Do you support the proposal as described in the Statement of Purpose and Plan of Study the student has submitted to you? Will the student's undergraduate education be as (or more) coherent, balanced, and thorough as with a departmental concentration? Why do you particularly recommend it? Have you any misgivings?

2) Are you willing to assume quasi-departmental responsibility for advising the student: tutoring him/her yourself or finding a colleague willing to tutor him/her; discussing course selections and signing his/her study card each term; approving changes in his/her Plan of Study; arranging for thesis readings; setting and grading a general examination; writing letters of recommendation?

**Please feel free to attach additional pages to this sheet.**

**Signature**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name: (Please print)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Dept. & Dept. Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(The Committee on Special Concentrations appreciates the care and candor with which you will reply.)

Return to Lisa Laskin, 1414 Mass Ave, Floor 3r, room 364, OR email to specialconc@fas.harvard.edu.