

Declaration of Track

Student Name: _____ **Date:** _____

All students complete a track in addition to the core curriculum in Chinese Acupuncture Studies. Please complete either Section A or Section B.

A. Please check the box(es) below for the track(s) which you intend to pursue:

- Japanese Acupuncture Styles (JAS)
 Chinese Herbal Medicine (CHM)
 Japanese Acupuncture Styles & Chinese Herbal Medicine (Dual)
 Pain Research, Education, and Policy Dual Degree with Tufts (PM)
please submit copy of Tufts acceptance letter and a copy of the enrollment agreement with this form

B. Change of Track (for students who have previously declared.)

Note that changing tracks may delay your graduation.

Request to change: (check all that apply)

- | | | |
|-----------------------------------|----|----------------------------------|
| <input type="checkbox"/> Drop JAS | or | <input type="checkbox"/> Add JAS |
| <input type="checkbox"/> Drop CHM | or | <input type="checkbox"/> Add CHM |
| <input type="checkbox"/> Drop PM | or | <input type="checkbox"/> Add PM |

please submit copy of Tufts acceptance letter with this form

Students who successfully complete the requirements for the Acupuncture track will be awarded Master of Acupuncture (MAc) degrees. Students who complete either the Chinese Herbal Medicine track or the Dual track will receive Master of Acupuncture and Oriental Medicine (MAOM) degrees. Students who earn the MAc will not be eligible to receive the MAOM. Any credits applied to either the MAc or the MAOM may not be applied to any degree NESAs may offer in the future.

Students admitted to the PM program at Tufts University must complete the degree requirements for BOTH institutions in order to be awarded their NESAs degree. Students who do not complete all of the requirements for the Tufts MS degree must complete either the JAS concentration or the CHM concentration coursework in order to be awarded a degree from NESAs.

Anticipated graduation: Term (select one): Spring Summer Fall **Year:** 20_____

All students must complete the graduation requirements in effect in the fall three years prior to their graduation date.

Student Signature: _____ **Date:** _____

Advisor Signature: _____ **Date:** _____

(only required for CHANGING tracks)

This form should be returned directly to the Registrar.