SPECIALTY YEAR for REGIONAL CAMPUS STUDENTS

A current medical student at a regional campus may request a fourth year of studies for the purpose of pursuing a specialty upon graduation. The request must be submitted between February 15 of the M2 year and August 15 of the M3 year. Once a request is approved, a student may not revert to the three-year curriculum. All students pursuing this option are encouraged to discuss this with their deans, the Office of Financial Aid and the Office of Student Accounts.

Section 1
Name: ____________________________________________

Last name | First name | Middle name

Home campus (circle one): CW  GB

If request is approved, intended graduation term/year: Fall Spring ______________

Year

Intended specialty: ____________________________________________________________

Student Signature: ____________________________ Date: ________________

Section 2
I approve/deny the student’s request.

Required Campus Dean Signature: ____________________________ Date: ________________

ALL COMPLETED FORMS MUST BE SUBMITTED BY CAMPUS DEAN TO:
Office of the Registrar, M3200, 8701 Watertown Plank Road, Milwaukee, WI 53226 • acadreg@mcw.edu /414-955-8733

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