



AUGUSTA UNIVERSITY  
**MEDICAL COLLEGE  
OF GEORGIA**

**Longitudinal Career Advising Letter of Support for Dual Degree Pathway**

Student name:

Longitudinal career advisor's name:

I have met with the above student and discussed the dual degree pathway (MD/MPH, MD/MBA, or MD/MCTS). I support the student's decision to apply for the pathway.

Yes

No

Longitudinal career advisor's signature: