

Today's Date \_\_\_\_\_

# STUDY ABROAD COURSES

Name \_\_\_\_\_ ID# \_\_\_\_\_ Year of Graduation \_\_\_\_\_

Cell ☎# \_\_\_\_\_ Home ☎# \_\_\_\_\_ Campus Box # \_\_\_\_\_

Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Period of Study Abroad:  Fall 20\_\_\_\_  Spring 20\_\_\_\_  Winter 20\_\_\_\_  Summer 20\_\_\_\_

Name of Partner Program: \_\_\_\_\_

Name of University or Program Title: \_\_\_\_\_

Study Abroad City and Country: \_\_\_\_\_

**A. Courses in your Major(s) or Minor(s)**

Chair of Department

<u>Number</u>	<u>Name</u>	<u>Will Transfer As...</u>	<u>Initials</u>	<u>Credits</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**B. Core Courses/General Education Requirements**

Registrar's Office

<u>Number</u>	<u>Name</u>	<u>Will Transfer As...</u>	<u>Initials</u>	<u>Credits</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**C. General Elective Courses**

Registrar's Office

<u>Number</u>	<u>Name</u>		<u>Initials</u>	<u>Credits</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

APPROVED BY \_\_\_\_\_

ENDORSED BY \_\_\_\_\_

Major Advisor

Department Chair (\*Advisor for BU/AC Majors)

\_\_\_\_\_  
2<sup>nd</sup> Major Advisor

\_\_\_\_\_  
2<sup>nd</sup> Major Chair