IMPORTANT: Please make sure you use the Instruction Sheet that corresponds to the College to which you belong DURING your study abroad term(s).

STUDY ABROAD COURSE APPROVAL SUMMARY FORM

IMPORTANT: Use INK only.

Return form(s) to the office indicated on instruction sheet.

NAME:	E-	E-MAIL:				EXPECTED GRAD DATE: UIN#:						
COLLEGE: _	MAJOR:		CONCEN	ITRA	OIT	N: MINOR:	MINOR:					
STUDY ABR	ROAD INSTITUTION & LOCATION:						TERM AND YEAR ABROAD:					
#	These columns to be completed by student	G (Course Approval			Use of Credit			
	rse Abroad with Subject/Number (if available) and f Course Abroad (e.g. summer, semester, year)	Course in database?		UIUC Subject and Number / or Level	Y	N	Course approver's signature and printed name	Add to data-base?	(See back of the form)			
	1	2	3	4	5	6	7	8	9			
Course: Length:							Sign: Print:					
Course: Length:							Sign: Print:					
Course: Length:							Sign: Print:					
Course: Length:							Sign: Print:					
Course: Length:							Sign: Print:					
The final dete		rements is rese	rved for the (College Office. The studer			n advised about residence, advanced hours, honors, an s read and understands study abroad policies and proce		quirements.			
Academic <i>A</i>	Advisor:						Date:					
	(Print Name)			(Signature)								
Student Signature:		Date:	Date: C			al:	Dat	e:				