

## Study Abroad Course Approval Record

Student Name: \_\_\_\_\_  
First Middle Initial Last

Student ID: 000 \_\_\_\_\_

Approval for study at: \_\_\_\_\_ Academic Term(s) and Year: \_\_\_\_\_  
Term Year

Program Provider and Name: \_\_\_\_\_

Overseas Course Name	Credits/ Hours	USI Course Equivalent	Counts towards USI Degree? (advisor initial)
			Yes / No Advisor approval _____
Department Chair Name		Department Chair Signature	

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