



# Course Approval Form for Semester/Year Abroad

## Valdosta State University

Center for International Programs

**ADDRESS** 204 Georgia Avenue • Valdosta, GA 31698-0037

**PHONE** 229.333.7410 • **FAX** 229.245.3849 • **WEB** www.valdosta.edu/studyabroad/

### Instructions for Student and Adviser

1. Compare available course descriptions from exchange institution with courses at home institution that fulfill major requirements.
2. Where possible list these courses and their home institution equivalents in the appropriate slots. Include as many alternates as possible because there are often unforeseen changes in registration plans due to inadequate information, canceled classes, or prerequisite problems.
3. Students **MUST** bring back copies of all syllabi, written work, papers, projects, and exams from the exchange institution so that academic work can be evaluated.
4. Students will be registered for study abroad credits by CIP while away, and grades will be recorded as incompletes until work can be evaluated by relevant academic departments. Once students return and transcripts arrive at the CIP from the exchange institution, students must meet with their department heads, who will produce memoranda listing the home institution equivalents and grades students should receive for their work. The memoranda should be sent to the Center for International Programs, which will send paperwork to the Registrar necessary to delete the generic courses and replace them with equivalents and letter grades.
5. A successful exchange experience requires **FLEXIBILITY** on the part of both student and academic adviser. Please expect the unexpected and understand that a degree of uncertainty is a facet of study abroad.

**Exchange Institution** \_\_\_\_\_

**Full Name of Student** \_\_\_\_\_

**VSU Student ID #** \_\_\_\_\_

**Exchange Dates** \_\_\_\_\_ **to** \_\_\_\_\_  
mm/dd/yyyy mm/dd/yyyy

Course #/ Name at Host Institution	Course #/ Name at Home Institution	Hours
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____



# Course Approval Form for Semester/Year Abroad

## Valdosta State University

Center for International Programs

**ADDRESS** 204 Georgia Avenue • Valdosta, GA 31698-0037

**PHONE** 229.333.7410 • **FAX** 229.245.3849 • **WEB** [www.valdosta.edu/studyabroad/](http://www.valdosta.edu/studyabroad/)

Alternate Course #/ Name at Host Institution	Alternate Course #/ Name at Home Institution	Hours
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

**Academic Advisor's Name**

**College/ Department**

**Date**

---

**Approval: Department Head's/ Dean's Signature**

---

**Approval: Center for International Programs**

**Date**

---