

USFSP Comparative Education in Germany Course Approval Form - Summer 2018

Name: _____ U#: _____ Major: _____

Student Instructions:

1. Schedule appointment with academic advisor to obtain signature. Director/Faculty Advisor for degree program may sign for graduate students.
2. Student signs Course Approval.
3. Student submits completed Course Approval to USFSP Education Abroad: studyabroad@usfsp.edu.

All undergraduate students enroll in EDF 3604. All graduate students enroll in EDF 6492.

All courses below are direct USFSP credit. Students will be registered for courses by USFSP Education Abroad during spring 2018.

Check if Taking Course	Course Title	USFSP Course	Credit Hours	Satisfies outstanding degree req.?		Faculty Leader Signature
				Yes	No	
<input type="checkbox"/>	School and Society	EDF 3604	3	<input type="checkbox"/>	<input type="checkbox"/>	n/a
<input type="checkbox"/>	Program Evaluation in Germany	EDF 6492	3	<input type="checkbox"/>	<input type="checkbox"/>	n/a

USF System Students: Academic Advisor signature of the student's major at home campus.

Non-USF System Students: Education Abroad Advisor signature of student's home institution.

Advisor Print Name	Department	Phone	Email
Advisor Signature	University (if not USF System) *By signing, I affirm the student has informed me of his/her plans to study abroad.		

Advising Notes:

By signing, I understand:

1. The above courses may contribute to Excess Credit Hours if not satisfying outstanding degree requirements.
2. I must notify USFSP Education Abroad of any course registration changes and provide a new course approval form.
3. USFSP is obligated to transfer all grades earned in a study abroad program and these grades will be factored into my GPA.
4. It is my responsibility to complete any necessary forms if applying for any Financial Aid or Scholarships: www.usfsp.edu/abroad > "For Students" > "Funding"
5. Completed Course Approval Form due by the program application deadline. See online program brochure for details: www.usfsp.edu/abroad.

Student Signature: _____

Date: _____