Academic Planning Form for Semester Study Abroad

TO BE COMPLETED BY THE STUDENT IN CONSULTATION WITH YOUR FACULTY/STAFF ADVISOR.

Don’t know who your faculty/staff advisor is? Check your Degree Audit report to confirm.

Student Name: ___________________  ID #: ____________________

Department/Major(s): ________________  Department/Minor(s): _______________________

Anticipated Graduation Date ________________  Faculty Advisor Name _______________________

Which year and/or semester, if any, might work best for you to study abroad for a semester? Discuss the following with your advisor:

☐ Are you aware of what is required to complete all degree requirements as noted in your Degree Audit?
☐ Are there required courses in my major that are only offered once per academic year (e.g. spring only) OR are there course sequences in my major that must be taken at a particular time?
☐ If I am in a highly structured major, are there distribution requirements or electives which I should save to take while abroad?
☐ Are there courses which, if taken abroad, will not fulfill major/minor requirements?
☐ I am considering going abroad during the semester(s) noted below. Are there courses for my major or minor I need to take abroad to remain on track to graduate in May/December _____?

NOTE: Generally students should assume that the following University-wide requirements may not be taken abroad: Diversity Categories 1 (D1); Foundational Writing and Information Literacy (FWIL). Check with your advisor for exceptions.

Planned semester/year abroad: ______________________

I have discussed the above with my advisor. I understand no one can promise that the courses I take while abroad will fulfill specific degree requirements until after a transfer evaluation is completed upon returning from abroad. I understand it is to my benefit to know what requirements I have left to complete prior to deciding on a program and prior to going abroad.

____________________________  ____________________
Student Signature  Date

To be completed by faculty/staff advisor

☐ This student met with me to discuss the factors which should be considered in planning for a study abroad experience.
☐ I entered note into the student’s Navigate record summarizing briefly my advice to student.

____________________________  ____________________
Advisor Signature  Date

STUDENT RETURN THIS FORM TO:
COLLEGE OF AGRICULTURE AND LIFE SCIENCES STUDENT SERVICES OFFICE, 106 MORRILL HALL