The University of Vermont

Academic Advising Form For Studying Abroad
TO BE COMPLETED BY THE STUDENT IN CONSULTATION WITH <mark>YOUR FACULTY ADVISOR</mark>.

Don't know who your faculty advisor is? Check your Degree Audit to confirm.
College of Education and Social Services students should complete this form **fall semester sophomore year**.

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? Consider and 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 particular courses that are only offered once per academic year (e.g. spring only) OR are there course sequences that must be taken at a particular time?
- ☐ Are there required courses that must be completed at UVM in order to fulfill requirements?
- ☐ Are there courses which, if taken abroad, will not fulfill major/minor requirements?
- ☐ I am considering going abroad during the semester(s) noted below. Which courses would I need to take abroad to remain on track for graduating with my major(s) and minor(s) by May/December _____?
- ☐ Will I be in compliance with the "UVM in residence" requirement regarding 30 of my last 45 credits being completed on campus?

Planned semester/year abroad: _____

I met with my advisor to discuss how study abroad may impact my academic progress toward graduation. 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 advisor

- ☐ This student met with me to discuss the factors which should be considered in planning for a study abroad experience.

Faculty advisor notes:

_____   _____
Faculty Advisor Signature   Date

STUDENT - RETAIN THIS FORM FOR YOUR REFERENCE   ☐ Check here if additional notes on back.