



Faculty Advisor Approval Form

To Be Completed by Applicant

Name of Applicant: _____

Study Abroad Program: _____

Major: _____

Year: Freshmen Sophomore Junior Senior Graduate

Classes To Be Taken on Study Abroad:	Credit	IS/ES
_____	_____	_____
_____	_____	_____
_____	_____	_____

To Be Completed by Advisor

This/These class(es) will count towards your major/minor.

This/These class(es) will not count towards your major/minor.

Student Signature

Academic Advisor

Dr. John Ballard