

Study Abroad Program Petition

The Study Abroad approval process is complete once you have secured the required signatures and submitted this form to the Study Abroad Office and registered for the 1 credit Education Experience Abroad course.

Name: _____ ID#: _____

Email address: _____ Phone #: _____

Program Type: Exchange Direct Enrollment 3rd Party Provider

Program Begin and End Dates: _____ to _____

Program Provider Name: _____

Program Location: City _____ Country: _____

Host Institution: _____

PLEASE NOTE: Approval for use of financial aid must be obtained through the Financial Aid office. Please initial one option below:

I will be using Financial aid/scholarships/grants and have spoken with my Aid counselor

Not using Financial aid/scholarships/grants for study abroad courses

Policies and procedural information:

1. Equivalency of the courses taken abroad must be pre-approved through the Records Office. See back page of this form.
2. Course changes should be reported immediately to the Records Office, and the Study Abroad Office.
3. A maximum of 18 hours may be taken elsewhere after my initial enrollment at ERAU and the last 30 credits towards a degree must be completed in residence.
4. All university transfer credit policies apply to study abroad courses.
5. It is my responsibility to ensure I meet any course load or other requirements imposed by financial aid, grants or scholarships I am receiving.
6. The Records Office must receive an official transcript in English directly from the issuing institution at completion of the study abroad program.

Exceptions to these policies must be approved by the student's Department Chair.

Study Abroad Program Petition CONT'D

Student Last name: _____

Courses and Credit Approval

Overseas course code and title**	ERAU Course to be Satisfied	ERAU # Cr Hrs	Equiv. Y/N	Reviewer (initials)

**Reminder: You must submit course descriptions in English for each of the above courses.

I have read, understand and will comply with the policies and requirements as laid out in the Study Abroad Program Petition

Student's Signature: _____ Date: _____

The Study Abroad Office has reviewed and verified that the proposed study abroad program is a valid academic program and recommends that the student be able to use her/his financial aid and scholarships to participate in this program.

Study Abroad Director Signature: _____ Date: _____

Academic Advisor's Name: _____ Signature: _____ Date: _____

Records Office Name: _____ Signature: _____ Date: _____

Additional Notes: _____
