

Fall: _____

Spring: _____

Summer: _____

Applicant: _____

Faculty Led / Student

Host Institution: _____

Date of Trip: _____ / _____ / _____ - _____ / _____ / _____

Location: _____

Course Requirements

Is there a course tied to the trip: Yes / No

If Yes:

Course Offered: _____

Credit Offered: _____

Department associated with course: _____

Length of course: Intersession / 8 Week / Semester

Approved by Chair and/or Dean of department: Yes / No

Three weeks prior to departure a syllabus of the course, flight itinerary, all Student Study Abroad Packets with copies of each student's passport and health insurance cards are required. Students will be required to pay for Study Abroad Insurance through the Office of International Programs and the faculty member leading the trip is required to oversee that payment. By signing this form, you are agreeing to comply with all Office of International Programs policies and regulations as well as insuring that you will turn in all proper documentation in a timely manner. You will be expected to represent NSU in a favorable light in every situation, country, and opportunity that you are presented with during this experience.

Applicant Signature: _____

Date: _____

Dean and/or Chair of Signature: _____

Date: _____