

**Study Abroad Form**Please return completed form to the Registrar's Office 1<sup>st</sup> floor Christy Admin building; Fax 620-229-6384

Personal Information (please	se print)
Name:	
SC ID:	
<b>Program Information</b>	
☐ Fall term (Submit this form Specific dates of study: ☐ Spring term (Submit this to Specific dates of study:	• • •
☐ Summer term (Submit this	
Destination Country:	
Name of Institution/Study Prog	ram:
Student Signature	as for transcript translation and evaluation may apply.  Date
CHECKLIST	
<ul> <li>Contact your Southweeter</li> <li>program, and any add</li> </ul>	estern College academic advisor to discuss curriculum plan and ditional required program materials (if applicable) program/foreign university
Financial Aid Office to	ksheet and make an appointment with Southwestern College assess aid contributions
<ul><li>Notify Financial Aid C</li><li>Enroll at Southwester</li></ul>	o the study abroad program/foreign university  Office of successful admission to program/foreign university  on College for Study Abroad course (LAS 395 for 12 hours) at  and sign and return this form.
Additional resource: www.scka	ns.edu/student-services/builders-abroad/study-abroad
Rev 03/04/09	Rec'd by Registrar's Office