

Non-CSU Study Abroad Advisor Approval Form

	(applicant name) is ort-Term Study Abroad Program for the Fall/Spring/Summer term (circle semester) of (country or program name).
understand that all courses taken through CSU must be to CSU Study Abroad Programs.	taken for a letter grade and that pass/fail or audit are not options for transient students
ignature	Date
For Study Abroad Advisor Complete and si	ign the following.
-	participation in a study abroad program? yes no If no, please explain.
 2) Will your institution accept the student's credits from yes, provided that the student passes each co no 	
3) Will the grades earned on this program appear on the actored into their GPA at your school?	student's academic record at your school? \Box yes \Box <i>no</i> If yes, will the grade(s) be
4) Has the student been a disciplinary case? □ yes □ no if yes, please explain	
	rom your University? \Box yes \Box no If yes, please provide the name, title, and contact er responsible party.
(8) Do you recommend this student? \Box yes \Box yes, with r	reservations below 🗆 no <i>if no, please explain</i> .
9) Any additional comments	
Name	Title
signature	Date

Fax completed form to (216) 687-3965 Mail to: 2121 Euclid Ave. KB 1150 Center for International Services and Programs Cleveland, OH 44115