



2010 Application Instructions Foreign Language Programs

1410 Jayhawk Blvd, Room 108 • Lawrence, KS 66045-7515
tel: 785.864.3742 • fax: 785.864.5040
osa@ku.edu • www.studyabroad.ku.edu

Use this application for the following programs:

- **China:** Huazhong Normal University
- **France:** Angers Clermont-Ferrand
- **Germany:** Bonn Stuttgart
- **Italy:** Florence, Dante Alighieri CLI Trento
- **Japan:** Fukuoka J. F. Oberlin Okayama Sophia Tsuda

If the program you are interested in is not listed, consult the Office of Study Abroad for the appropriate application.

Eligibility

- Eligibility requirements vary by program. See the program brochure for details.
- The minimum requirement for all KU Study Abroad participants is status of good standing and a cumulative KU GPA of 2.5 UG/3.0GR. However, many programs have higher GPA minimums and/or additional eligibility requirements.
- Applicants who do not meet the minimum requirements may submit a petition for an exception to the standards. Petition forms are available from an OSA Program Coordinator.

Application Fee

- **Current KU Students:** no application fee.
- **Non-KU Students:** non-refundable \$40.00 application fee, check payable to The University of Kansas.
- **Non-KU International Students (non-permanent residents):** non-refundable \$85 application fee, check payable to The University of Kansas.
- **KU students not currently enrolled:** Must apply for readmission through the KU Admissions Office, www.admissions.ku.edu. Readmission to KU must be confirmed before participating in a study abroad program.

Application Procedure

- A complete application consists of:
- A. Applicant Profile (attached)
 - B. Statement of Purpose
 - C. Autobiography in Foreign Language
 - D. Official Paper Transcript (electronic PDF not accepted)
 - E. Language Proficiency Report (attached)
 - F. Two Academic References (attached)
 - G. Academic Plan and Approval (attached)
- Specific instructions are on the back of this page.
 - Submit all materials to KU OSA. References may be sent separately.
 - Only complete applications will be considered for acceptance.

Your Contact Information

- The KU OSA uses e-mail, phone and current address to deliver critical information and materials to applicants and participants. Applicants who do not keep OSA updated are in jeopardy of missing critical information, which may mean losing a place on the program.
- It is your responsibility to submit changes to the KU Office of Study Abroad IN WRITING.

Deadline

Spring 2010: October 1, 2009 Fall 2010: March 1, 2010

Acceptance

- Only complete applications will be reviewed.
- Check to see if your references have been received on the KU OSA website, www.studyabroad.ku.edu.
- When you are accepted you will receive a packet containing a letter, contract and acceptance forms.

Deposit

- \$300 due upon acceptance.
- A non-refundable \$300 deposit and a signed contract are due on **November 16** for Spring programs or **April 15** for Fall and Academic Year programs. The contract and deposit secure your place in the program. The deposit is the first payment of the program fee.
- The deposit is due whether or not you will pay the balance with financial aid.
- The deposit may be paid by check, Discover, MasterCard or Visa.
- If you are not sure whether or not you will be financially or personally able to participate at the time of acceptance, notify the OSA but **DO NOT** submit the contract and deposit. OSA cannot guarantee your place past the deposit due date.

REQUIRED ORIENTATION

Spring 2010: Saturday, December 5, 2009 Fall 2010: Saturday, April 24, 2010
■ All KU students accepted to this program must attend the orientation as a condition of participation.

Financial Aid Information

KU Students

- All KU students planning to apply financial aid to the program fee must meet in person with the Student Services Coordinator at the OSA for complete instructions.
- Step-by-step instructions are available at the OSA. Ask for the sheet, 'Using Federal Financial Aid for Study Abroad'.

Types of Aid Available for KU Students

- Federal aid and KU Endowment loans are available to eligible students. Visit the Office of Student Financial Aid (OSFA), 50 Strong Hall, www.financialaid.ku.edu.
- Study Abroad Semester/Year Scholarships: Qualified KU students may apply for these supplementary scholarships (\$500-\$1000 for the semester, \$750-\$1500 for the academic year). Applications for these scholarships are available at the OSA and on the OSA website. Applicants must be degree-seeking undergraduates or graduate students at KU with a minimum GPA of 3.0 UG/3.5 GR. Deadlines: October 1 for Spring, and March 1 for Fall. No late or incomplete scholarship applications will be reviewed.
- Other Scholarships: Most KU scholarships can be applied toward the study abroad program fee.

Non-KU Students:

- Check into the resources available at your home institution.
- The KU OSA will consider requests to sign a Financial Aid Consortium Agreement with the student's home institution in order to facilitate the use of financial aid from the home institution.

Attachments/Additional Materials

 A. Applicant Profile B. Statement of Purpose

- Attach a typed statement of purpose, no longer than one page, double-spaced, addressing why you would like to participate in this program and what you will contribute to the program.
- Be sure your name, KUID or SSN, the date and the program name are in the upper right corner of the page.

 C. Autobiography in a Foreign Language

- Attach a typed statement, no longer than one page, double-spaced, giving a basic overview of who you are. Write in the language of your host institution. Students without prior language study for Angers, France or Florence, Italy may write the autobiography in English.
- Be sure your name, KUID or SSN, the date and the program name are in the upper right corner of the page.

 D. Transcript (**required for Germany, PR China and Japan applicants**) or ARTS form

- Students applying for programs in Germany, PR China and Japan must submit an official paper transcript (electronic PDF not accepted).
- All other applicants may submit an ARTS form.
- Attach your transcript to your application or have the transcript sent directly to the KU OSA. If attached to your application, the transcript should be in an envelope sealed by your institutional registrar (KU students may order a transcript to be picked up at 151 Strong Hall).

 E. Language Proficiency Report

- This form must be completed by a language instructor who can evaluate your skills in the appropriate language.
- It is preferable, but not required, for the instructor to have had you in a class.

 F. Two Academic References (References may be turned in separately)

- Two reference forms are attached. Follow the instructions on the form. BOTH references must be from academic instructors who have had you in a class. At least one of the two references should be from a language instructor. (Exception: students without prior language study who are applying for Angers, France or Florence, Italy may submit two references from any academic instructors.)
- Your instructor will return the form to the KU OSA, or you can ask your instructor if you can collect the completed reference, in a sealed envelope, to turn in with your other application materials.
- It is your responsibility to deliver the reference forms to your instructors and to ensure that they have been returned to the OSA.
- Check to see if your references have been received on the OSA website, www.studyabroad.ku.edu

 G. Academic Plan and Approval Form: Foreign Institution

- Follow instructions on the form.
- Attach the completed, signed form to your application.

 H. Application Fee

- Current KU students: no admission fee
- Non-KU students: enclose a \$40 check, payable to The University of Kansas
- Non-KU International Students (non-permanent residents): non-refundable \$85 application fee, check payable to The University of Kansas.
- KU students not currently enrolled: You must apply for readmission through the Office of Admissions, www.admissions.ku.edu, by the application deadline. You must be accepted for readmission to KU in order to participate in the program.



Applicant Profile Foreign Language Programs

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osa@ku.edu • www.studyabroad.ku.edu

| 1. Program to which you are applying: | Term/Year |
|--|--|
| <input type="checkbox"/> China: ___ Huazhong Normal University <input type="checkbox"/> France: ___ Angers ___ Clermont-Ferrand <input type="checkbox"/> Germany: ___ Bonn ___ Stuttgart <input type="checkbox"/> Italy: ___ Florence, Dante Alighieri CLI ___ Trento <input type="checkbox"/> Japan: ___ Fukuoka ___ J. F. Oberlin ___ Okayama ___ Sophia ___ Tsuda <i>If the program you are interested in is not listed, consult the Office of Study Abroad for the appropriate application.</i> | <input type="checkbox"/> Fall 20___ <input type="checkbox"/> Spring 20___ <input type="checkbox"/> Acad. Yr. 20___ - 20___ <small>Note: Check the program brochure for available terms of study for your program.</small> |

2. Personal Data

| | | | |
|---------------------------------|---|-------------------------|--------------------------|
| ↑Last name | ↑First name | ↑Middle name | ↑KUID (KU students only) |
| / / | <input type="checkbox"/> Male <input type="checkbox"/> Female | _____ - _____ - _____ | |
| ↑Date of Birth (month/day/year) | ↑Sex | ↑Social Security Number | |

US Citizen US Permanent Resident Non-US Citizen/Non-Permanent Resident: _____

Ethnic Group (Optional): In an effort to track participation of culturally diverse students in study abroad programs, The University of Kansas collects information about participants. This information is requested on a voluntary basis and will be kept confidential. Providing this information will not affect your participation in any KU study abroad program, and will be used only in accordance with applicable federal and state laws.

Please check all blocks that apply to you:

American Indian or Alaskan Native Asian or Pacific Islander African American Hispanic Non-US Citizen White

| 3. Current Address – where you will be when school is in session | 4. Permanent Address – where you will be when school is not in session |
|--|--|
|--|--|

| | |
|---|--|
| When will you move from this address? / / (month / day / year) | ↑Name of primary resident (parent/guardian/spouse/other) |
| ↑Street | ↑Street |
| ↑City, State, Zipcode | ↑City, State, Zipcode |
| ↑Phone (include area code) | ↑Phone (include area code) |
| ↑E-mail address (print clearly, separate characters) | Can you be reached by e-mail when school is not in session? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| ↑Alternate e-mail address | |

5. Academic Data

| | | |
|--|-------------------------|---|
| ↑ Institution where you are currently enrolled | | <input type="checkbox"/> Fr <input type="checkbox"/> So <input type="checkbox"/> Jr <input type="checkbox"/> Sr <input type="checkbox"/> Grad. <input type="checkbox"/> Other |
| | | ↑ Current Status |
| ↑ Major | ↑ School | |
| ↑ 2 nd Major or Minor, if applicable | ↑ School | |
| ↑ GPA | as of / (semester/year) | ↑ Hours completed by start of program |
| | | ↑ Expected Graduation date (sem/yr) |
| ↑ Names of other institutions you have attended | | |
| | ↑ Dates attended | ↑ Degree awarded, if any |
| ↑ Program-related foreign language you have studied (if applicable) | | |
| | ↑ High School years | ↑ College semester hours |
| ↑ List all college-level courses you have taken in this language, including courses you are currently taking | | |

↑ Extracurricular Activities, Scholarships, Honors

6. Academic References (references may be turned in separately)

List your two referees below. It is your responsibility to deliver the reference forms to your instructors and to ensure that they have been returned to the OSA.

| | |
|--|--------|
| ↑ Reference 1. Name, Title, Academic Department, Institution | e-mail |
| ↑ Reference 2. Name, Title, Academic Department, Institution | e-mail |

7. Optional Authorization to Release Student Account Information

The financial and non-directory information on your student account is confidential and protected by the Family Educational Rights & Privacy Act (FERPA). The Office of Study Abroad cannot release certain information to another person without your written authorization. This form will grant the Office of Study Abroad authority to release specific information about you to the person(s) you designate below.

I authorize the Office of Study Abroad to release my study abroad program, academic, financial aid and payment information to the person(s) listed below. I understand this authorization will remain in effect until I submit a written request to the Office of Study Abroad to cancel this authorization.

| | | |
|--|------------------------------------|---------------------|
| ↑ Designee 1. Name (please print), relation to you | Last 4-digits of social security # | Month/Year of Birth |
| ↑ Designee 2. Name (please print), relation to you | Last 4-digits of social security # | Month/Year of Birth |

8. Applicant Agreement and Release

I affirm that the information given in this application is true and correct to the best of my knowledge. I agree to allow the KU OSA access to academic and financial records available through the University of Kansas and authorize the Office of Financial Aid to share information from my file regarding my application to study abroad.

| | |
|-----------------------|--------|
| X | |
| ↑ Applicant Signature | ↑ Date |



Application for Study Abroad Reference form

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Part 1. To be completed by student

| | | | |
|-------------------|-----------------|--|---------------------------|
| ↑ Last name | ↑ First name | ↑ Middle name | ↑ KUID (KU students only) |
| ↑ Name of program | ↑ City, Country | Fall 20__ Spring 20__ Summer 20__ Acad. Year 20__ - 20__ | ↑ Semester of enrollment |

Student Waiver Statement (optional)

I understand my right under the provisions of PL 93-380.513 (Family Educational rights and Privacy Act of 1974) to inspect letters of recommendation on my behalf. In order to encourage the authors of letters about me to write with candor, I have elected not to exercise my rights under this statute and affirm that I shall not do so in the future.

I understand that this document will be used only for the purposes of evaluating my qualification for study abroad by the University of Kansas program administrators and/or selection committee members, and cooperating institutions, and will not be available to any other institution, organization or party.

| | |
|--------------------------------|------|
| X | Date |
| Applicant Signature (optional) | |

Part 2. To be completed by Instructor

Students participating on study abroad programs are chosen on the basis of their academic records, personal qualifications and evaluations by professors. Because a cooperative spirit and an awareness of his/her position as a representative of the University are necessary for study abroad, please indicate how you think this

applicant will make use of an academic opportunity abroad, taking into consideration his/her character, adaptability, stability and academic competence in comparison with other students at similar stages in their careers.

A. How long and in what capacity have you known the applicant?

| | Excellent | Good | Fair | Poor | Unknown |
|-----------------------------------|-----------|------|------|------|---------|
| B. General Preparation | | | | | |
| Articulateness in speech | | | | | |
| Articulateness in writing | | | | | |
| Academic potential | | | | | |
| Self-discipline and self-reliance | | | | | |
| Ability to get along with others | | | | | |
| Respect for other cultures | | | | | |

| C. Foreign Language Preparation (where applicable) | | | | | |
|--|--|--|--|--|--|
| Reading | | | | | |
| Composition | | | | | |
| Comprehension | | | | | |
| Conversation | | | | | |

D. Comments

Please comment as specifically as possible on the applicant in terms of the following:

- 1) academic suitability for study abroad
- 2) personal suitability for living abroad;
- 3) known weaknesses relevant to study abroad;
- 4) linguistic preparation, if applicable;
- 5) any other factors which you believe may affect a successful study abroad experience.

Instructor Information

| | | |
|-------------------------------|------------------|---------------------|
| X | | |
| ↑ Signature | | ↑ Date |
| ↑ Name (please print or type) | ↑ Position/Title | ↑ Department/School |
| ↑ Institution, City, State | ↑ e-mail | |

Please return this form directly to The University of Kansas, Office of Study Abroad, 1410 Jayhawk Blvd, Room 108, Lawrence, KS 66045-7515



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Part 1. To be completed by student

| | | | |
|-------------------|-----------------|--|---------------------------|
| ↑ Last name | ↑ First name | ↑ Middle name | ↑ KUID (KU students only) |
| ↑ Name of program | ↑ City, Country | Fall 20__ Spring 20__ Summer 20__ Acad. Year 20__ - 20__ | ↑ Semester of enrollment |

Student Waiver Statement (optional)

I understand my right under the provisions of PL 93-380.513 (Family Educational rights and Privacy Act of 1974) to inspect letters of recommendation on my behalf. In order to encourage the authors of letters about me to write with candor, I have elected not to exercise my rights under this statute and affirm that I shall not do so in the future.

I understand that this document will be used only for the purposes of evaluating my qualification for study abroad by the University of Kansas program administrators and/or selection committee members, and cooperating institutions, and will not be available to any other institution, organization or party.

| | |
|--------------------------------|------|
| X | Date |
| Applicant Signature (optional) | |

Part 2. To be completed by Instructor

Students participating on study abroad programs are chosen on the basis of their academic records, personal qualifications and evaluations by professors. Because a cooperative spirit and an awareness of his/her position as a representative of the University are necessary for study abroad, please indicate how you think this

applicant will make use of an academic opportunity abroad, taking into consideration his/her character, adaptability, stability and academic competence in comparison with other students at similar stages in their careers.

A. How long and in what capacity have you known the applicant?

| | Excellent | Good | Fair | Poor | Unknown |
|-----------------------------------|-----------|------|------|------|---------|
| B. General Preparation | | | | | |
| Articulateness in speech | | | | | |
| Articulateness in writing | | | | | |
| Academic potential | | | | | |
| Self-discipline and self-reliance | | | | | |
| Ability to get along with others | | | | | |
| Respect for other cultures | | | | | |

C. Foreign Language Preparation

(where applicable)

| | | | | | |
|---------------|--|--|--|--|--|
| Reading | | | | | |
| Composition | | | | | |
| Comprehension | | | | | |
| Conversation | | | | | |

D. Comments

Please comment as specifically as possible on the applicant in terms of the following:

- 6) academic suitability for study abroad
- 7) personal suitability for living abroad;
- 8) known weaknesses relevant to study abroad;
- 9) linguistic preparation, if applicable;
- 10) any other factors which you believe may affect a successful study abroad experience.

Instructor Information

| | | |
|-------------------------------|------------------|---------------------|
| X | | |
| ↑ Signature | | ↑ Date |
| ↑ Name (please print or type) | ↑ Position/Title | ↑ Department/School |
| ↑ Institution, City, State | ↑ e-mail | |

Please return this form directly to The University of Kansas, Office of Study Abroad, 1410 Jayhawk Blvd, Room 108, Lawrence, KS 66045-7515



Application for Study Abroad Language Proficiency Report

University of Kansas • Office of Study Abroad
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osa@ku.edu • www.studyabroad.ku.edu

Part A. To be completed by student

| | | | |
|----------------------|-----------------|--|---------------------------|
| ↑ Last name | ↑ First name | ↑ Middle name | ↑ KUID (KU students only) |
| ↑ Name of program | ↑ City, Country | Fall 20____ Spring 20____ Summer 20____ Acad. Year 20____ - 20____ ↑ Semester of enrollment | |
| ↑ Native Language(s) | | ↑ Language for which report is being submitted | |

What course work have you completed, in or related to, the required language?

List course names, including courses in progress, a brief description and grade received.

What other experiences have you had in the required language?

Part B. To be completed by a Professional Language Instructor

1) Please indicate your opinion of the applicant's present language ability in each of the following categories

| | | |
|----------------------------|-------|--|
| Aural Comprehension | _____ | None |
| | _____ | Limited to slow, uncomplicated sentences |
| | _____ | Understands simple conversation |
| | _____ | Understands conversations on simple academic topics |
| | _____ | Understands sophisticated discussion on academic topics |
| Speaking Ability | _____ | None |
| | _____ | Able to complete structurally simple, short phrases |
| | _____ | Uses basic grammatical structure, speaking with limited vocabulary |
| | _____ | Uses structural patterns, but not with consistent accuracy, adequate to participate in conversational topics |
| | _____ | Has control over structural patterns; can handle a wide range of conversational situations |
| Reading Ability | _____ | None |
| | _____ | Limited to simple vocabulary to sentence structure |
| | _____ | Understands conventional topics and non-technical subjects |
| | _____ | Understands materials which contain idioms and specialized terminology |
| | _____ | Understands sophisticated materials, including those in proposed field of study |
| Writing Ability | _____ | None |
| | _____ | Writes simple sentences on conventional topics, with some errors in spelling and structure |
| | _____ | Writes on academic topics with few errors in structure and spelling |
| | _____ | Writes with idiomatic ease of expression and feeling for the style of the language |

2) What is your opinion of the applicant's ability to pursue university-level course work in this language?

- Should have no difficulty
- Should be able to manage adequately after a short period of adjustment abroad
- Will require additional training
- Will require considerable training before necessary competence can be attained

3) How was the evaluation determined?

- Based on knowledge of applicant's coursework in language at this institution
- Written examination. Name of test and date administered: _____
- Oral examination Date administered: _____
- None

4) Please add any additional comments relating to the applicant's linguistic ability.

5) Please mark as appropriate:

- I unconditionally approve the applicant for study abroad in this language
- I conditionally approve the applicant for study abroad in this language
- I do not approve the applicant for study abroad in this language.

6) In case of conditional approval, please describe the conditions the applicant must satisfy to receive clearance for study abroad?

Instructor Information

Signature

Date

Name (please print or type)

Position/Title

Department/School

Institution, City, State

e-mail

Please return this form directly to The University of Kansas, Office of Study Abroad



Application for Study Abroad Academic Plan and Approval: Direct Enrollment at a Foreign Institution

INSTRUCTIONS

A completed Academic Plan and Approval form is required in order for grades to be posted on your KU transcript. Consult your OSA Program Coordinator for program-specific instructions.

Make a copy of this form and take it abroad with you.

STEP 1: Plan the courses you will take abroad

Research available courses: Your OSA Program Coordinator will refer you to catalogs, web sites or other sources for course availability at your host institution. Your Coordinator will also give you information about:

- 1) the standard full-time course load,
- 2) credit hour conversions,
- 3) any restrictions to courses or departments at your host institution.

Write the courses you plan to take at your host institution on the left-hand side of the Academic Plan Approval form. Be sure to list several alternatives in case your first choices are not available.

If there are not enough spaces to list all the courses you are interested in, you can obtain an additional form from the Office of Study Abroad (OSA) or the OSA website, www.studyabroad.ku.edu

Step 1 for Non-KU students:
Complete Step 1 as for KU students.

STEP 2: Obtain *tentative* approval for KU course equivalents in each academic department

Each department has a Study Abroad Faculty Advisor who determines KU equivalencies for courses taken at foreign institutions. Your OSA Coordinator has a list of Advisors' names and contact information. This information is also available on the OSA website, www.studyabroad.ku.edu.

You must obtain tentative approval from the Study Abroad Faculty Advisor in each department that corresponds to the courses you wish to take abroad. For example, a history course equivalent must be approved by the Study Abroad Faculty Advisor in the History department.

When you meet with the Study Abroad Faculty Advisor, bring all available course information, such as a catalog description, syllabus, or texts. The Study Abroad Faculty Advisor will evaluate this information to determine a *tentative* KU equivalent.

If available course information is insufficient, the Study Abroad Faculty Advisor may ask you to bring back evidence of course work, syllabus, assignments, etc, at the end of the study abroad period before finalizing the approval.

When available, your OSA Coordinator will give you a list of course equivalents that have been approved in the past. The list will serve as a guideline as you select courses and work with Advisors.

Step 2 for Non-KU students:
Under KU Course Equivalent, write in **ONLY** pre-approved courses from the program list. KU will determine course equivalents for any courses that have not been pre-approved. It will be your responsibility to bring back a syllabus in English for any host institution course that has not been pre-approved.

STEP 3: Meet with your Academic Advisor

After you have KU course equivalents approved for all of your courses, your Academic Advisor must approve your overall plan.

If you have not yet declared a major, make an appointment with the Freshman-Sophomore Advising Center (FSAC). The FSAC Advisor will sign your form. If you have declared a major or are in the Honors program, meet with your designated Academic Advisor.

Take a copy of your ARTS form so that you can discuss how the courses you will take abroad fit in with your degree program. Review the requirements that will be met while you are abroad as well as the credits that will remain when you return.

Step 3 for Non-KU students:
Obtain the approval of the appropriate advisor at your home institution for your overall enrollment. Be sure to discuss how KU credit earned on the program will apply toward your degree.

STEP 4: If you will have two semesters (30 hours) or fewer to graduate when you return...

Make an appointment with the Graduation Officer in your school to do a Graduation Check and plan your last semester(s) at KU *before* you leave.

If you will complete ALL degree requirements while abroad, arrange to *apply for your degree before you depart*. It can take several months after the end of your program to post study abroad credit. Let your OSA Coordinator know your graduation plans. Stay in contact to ensure that grade posting moves as quickly as possible.

Credits must be posted by a specific date in order to graduate during the term in which you completed your coursework abroad. Visit the OSA website at www.studyabroad.ku.edu for the applicable date for each term.

Academic Plan and Approval: Direct Enrollment at a Foreign Institution

Step-by-Step Instructions for completing KU Course Equivalencies

| Host Institution Course | | | KU Course Equivalent | | | | |
|-------------------------|--|---------------------|--|--------------|--------------|---|---|
| | Equivalent KU Level | Equivalent KU Hours | Dept Code | Course Title | Credit Hours | Type of Degree Requirement | Conditional Approval? |
| 1. 1. | <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |

Host Institution Course

1. Enter the course code (if any) and name of the course that you want to take at the Host Institution.
2. Mark the level of the Host Institution course that corresponds to similar courses at KU, if this information is available from your OSA Coordinator.
3. Enter the number of KU credit hours the course is worth, according to the information given by your OSA Coordinator.

KU Course Equivalent

- 4., 5. Enter the pre-approved KU equivalent course Department abbreviation and course number and course name. If the course has no prior KU equivalent, then leave this blank, to discuss with the Study Abroad Faculty Advisor.
6. Enter the number of credit hours for the course.
7. Mark the type of degree requirement that the course satisfies. For instance, say the KU equivalent is ANTH 108, which is on the SC Principal Course list. If you have yet to satisfy the 'SC' category of Principal Courses, mark the Gen. Ed. Box and write 'SC' in the blank following. If you have already satisfied the 'SC' principal course category, then mark the course as an elective.
8. If the Study Abroad Faculty Advisor needs additional information to give final approval for a KU equivalent course, mark 'Yes'. The Study Abroad Faculty Advisor should attach a statement indicating what documentation you must bring back and the course content that must be covered in order for final approval to be granted. Otherwise, the Study Abroad Faculty Advisor should mark 'No', indicating that no further information is required to approve the KU course equivalent and that the KU course equivalent is approved for this student.
9. For individual or new approvals, the Study Abroad Faculty Advisor should print his/her name, sign and date the approval. If the course is pre-approved, write 'pre-approved' in the Department Representative space. Your OSA Coordinator will check the approval, then sign and date for this course.

Academic Plan and Approval: Direct Enrollment at a Foreign Institution

Student Name (please print) _____ KUID or SSN _____ Major (s) _____

Fall 20__ Spring 20__ Summer 20__

Host Institution _____ Program Location _____ Term(s) _____

Statement of Understanding

1. I have discussed these plans with my academic advisor and the appropriate graduation official and have familiarized myself with all degree and major requirements.
2. It is my responsibility to enroll in the appropriate courses at the foreign institution. The granting of credit for these courses is dependent upon their successful completion.
3. I must inform my academic advisor and the Office of Study Abroad of any changes in course choice or curriculum.
4. If I intend to finish all degree requirements while abroad, I know the rules and procedures and have made all arrangements before going abroad.
5. I understand that all coursework completed and grades received will be posted on my official KU transcript.

X

Student Signature _____ Date _____

X

Academic Advisor (Print Name, Dept.) _____ Signature _____ Date _____

| Host Institution Course | Equivalent KU Level | Equivalent KU Hours | KU Course Equivalent | | | | |
|-------------------------|--|---------------------|----------------------|--------------|---|---|---|
| | | | Dept Code | Course Title | Credit Hours | Type of Degree Requirement | Conditional Approval? |
| I. 1. | <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | ↑ Department Representative (Print Name) _____ ↑ Signature _____ ↑ Date _____ | | |
| II. 1. | <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | ↑ Department Representative (Print Name) _____ ↑ Signature _____ ↑ Date _____ | | |
| III. 1. | <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | ↑ Department Representative (Print Name) _____ ↑ Signature _____ ↑ Date _____ | | |
| IV. 1. | <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | ↑ Department Representative (Print Name) _____ ↑ Signature _____ ↑ Date _____ | | |
| | | | 9. | | ↑ Department Representative (Print Name) _____ ↑ Signature _____ ↑ Date _____ | | |

Academic Plan and Approval: Direct Enrollment at a Foreign Institution

| Host Institution Course | | | KU Course Equivalent | | | | |
|-------------------------|---|---------------------|--|--------------|--------------|---|---|
| | Equivalent KU Level | Equivalent KU Hours | Dept Code | Course Title | Credit Hours | Type of Degree Requirement | Conditional Approval? |
| V. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |
| VI. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |
| VII. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |
| VIII. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |
| IX. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |
| X. 1. | 2. <input type="checkbox"/> 100-200 <input type="checkbox"/> 300-500 <input type="checkbox"/> 600-900 <input type="checkbox"/> unknown | 3. | 4. | 5. | 6. | 7. <input type="checkbox"/> Major _____ <input type="checkbox"/> Gen. Ed _____ <input type="checkbox"/> Elective | 8. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | 9. | | | | |
| | | | ↑ Department Representative (Print Name) | | ↑ Signature | | ↑ Date |