



## 2010 Application Instructions Semester Program in Ronda, Spain

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 program:

### Spring or Fall Semester in Ronda, Spain

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

#### Eligibility

- **Ronda:** Student status in good standing; maximum one or two semesters of Spanish, cumulative GPA 2.5.
- 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 admission 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](http://www.admissions.ku.edu). Admission to KU must be confirmed before participating in study abroad program.

#### Application Procedure

- A complete application consists of:
- A. Applicant Profile (attached)
  - B. Two 2"x2" photographs (passport-size)
  - C. Statement of Purpose
  - D. Autobiography in Spanish
  - E. ARTS form or Official Paper Transcript (electronic PDF not accepted)
  - F. Language Proficiency Report (attached)
  - G. Two Academic References (attached)
  - H. Academic Plan and Approval (attached)
  - I. Housing form (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](http://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, 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](http://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 the scholarship 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. 2"x2" Photos

- Attach two photographs, approximately 2"x2" (passport-size), to your application.
- Color Xeroxes and Polaroids are not acceptable.
- Print your name, program and term, and KUID or SSN on the back of each photo.

 C. Housing Questionnaire D. 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.

 E. Autobiography in Spanish

- Attach a one-page statement giving a basic overview of who you are. Please address such topics as: self-description, likes & dislikes, interests & hobbies, travel experience, and your family background.
- Be sure your name, KUID or SSN, the date and the program name are in the upper right corner of the page.

 F. ARTS form or Transcript

- KU Students: Attach a current ARTS form. An official transcript is not necessary for this application.
- Non-KU Students: Enclose one transcript. An unofficial transcript 'issued to student' is acceptable.

 G. 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 necessary, for the instructor to have had you in a class.

 H. 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.
- 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](http://www.studyabroad.ku.edu)

 I. Academic Plan and Approval Form: Direct Enrollment

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

 J. 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](http://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

# Semester Program in Ronda, Spain

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osa@ku.edu • www.studyabroad.ku.edu

1. Program to which you are applying:	Term/Year
<input type="checkbox"/> Spring or Fall Semester in Ronda, Spain  <i>If the program you are interested in is not listed above, consult the Office of Study Abroad for the appropriate application.</i>	<input type="checkbox"/> Spring 20____  <input type="checkbox"/> Fall 20____

## 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	
<input type="checkbox"/> US Citizen <input type="checkbox"/> US Permanent Resident <input type="checkbox"/> 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
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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**

Fr So Jr Sr Grad. Other  
 ↑ Current Status

↑ Institution where you are currently enrolled

↑ Major

↑ School

↑ 2<sup>nd</sup> 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

## Dietary, Health, and Housing Requests

Name \_\_\_\_\_

Program \_\_\_\_\_

### Section A – All participants

The information below is requested in order that we might best meet your special needs or dietary considerations during group excursions, group meals, or in your living situation. Please answer the following questions as honestly as possible. **It will not affect our consideration of your application or your acceptance to the program.**

1. Do you have a special diet? Vegetarian?

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2. Are there certain foods you can't eat? (Check all that apply)

Red Meat     Pork     Fish     Chicken     Dairy     Other: \_\_\_\_\_

3. Are you allergic to anything that we should know about?

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4. Please provide any additional information that might help us plan for your time in your host country (i.e. medical conditions, lifestyles, dietary needs, etc.):

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### Section B – Ronda and Costa Rica participants only

We would like to identify your priorities for a comfortable living situation. While we cannot guarantee a “perfect match” for you, your answers will serve as a guide for us in placing you with a family. Please remember that you will be living with this family for a semester or a year. You should take into account that living abroad will not be the same as living here with your family. Also, some host mothers tend to be protective and therefore concerned about your well-being in addition to your activities. They might prefer that you not bring friends home at certain times or that you be on time for dinner and so on. Others are less concerned about these things.

Please answer the following questions as honestly as possible:

1. I would prefer:

- |   |   |
|---|---|
| a) _____ Family with children                       | c) _____ House with pets                |
| _____ Family without children                       | _____ House without pets                |
| b) _____ Family that regards you as a family member | d) _____ House with non-smoking members |
| _____ Family that regards you as a renter           | _____ No preference                     |

2. Do you smoke? \_\_\_\_\_

3. How late do you usually stay out at night?                      weekdays \_\_\_\_\_ weekends \_\_\_\_\_

4. Please provide any additional information that might be helpful in finding the best match:

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# Application for Study Abroad Reference form

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

## 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	Applicant Signature (optional)	Date
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## 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?

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

<b>C. Foreign Language Preparation</b> (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



# 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

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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?

---



---



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

<b>C. Foreign Language Preparation</b> (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

<b>Aural Comprehension</b>	_____ None
	_____ Limited to slow, uncomplicated sentences
	_____ Understands simple conversation
	_____ Understands conversations on simple academic topics
	_____ Understands sophisticated discussion on academic topics
<b>Speaking Ability</b>	_____ 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
<b>Reading Ability</b>	_____ 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
<b>Writing Ability</b>	_____ 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

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# 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 language level and the course code 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 (click on the link to the list of equivalent KU courses on the KU Study Abroad website's Ronda program page).
3. Enter the number of KU credit hours the course is worth, according to the course equivalency document. If unknown, or if you are unsure, leave blank.

### KU Course Equivalent

- 4., 5. Enter the pre-approved KU equivalent course Department abbreviation (SPAN) and course number and course name (click on the link to the list of equivalent KU courses on the KU Study Abroad website's Ronda program page). If the Ronda course is listed on the course equivalency sheet as requiring the Dept. of Spanish & Portuguese to assign an appropriate KU equivalent course on an individual basis, leave these boxes blank. Note: SPAN 270 host institution course = SPAN 270 KU course (see KU Study Abroad website's Ronda program page for more info).
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 Departmental 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 and that 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				Type of Degree Requirement	Conditional Approval?
			Dept Code	Course Title	Credit Hours			
I. 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	
II. 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	
III. 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	
IV. 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	

# Academic Plan and Approval: Direct Enrollment at a Foreign Institution

Host Institution Course	Equivalent KU		KU Course Equivalent				Type of Degree Requirement	Conditional Approval?
	Level	Hours	Dept Code	Course Title	Credit Hours			
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	
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			↑ Department Representative (Print Name)		↑ Signature		↑ Date	