

Study Abroad Academic Pre-Approval Form

Name: _____ Student#: _____

Home Institution: _____ College/School: _____

Major(s): _____ Minor: _____

UNA Faculty-Led Program:

Faculty Leader: _____ Destination: _____ : Program Dates: _____

Magellan Exchange:

(Check One): Semester _____; Year _____ Program Dates: _____

Destination Country: _____ Partner University: _____

Course title on Study Abroad Program	Credit hours	Course counts towards:	Equivalent UNA Course
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	
		Major requirement ____ Minor requirement ____ General Ed. ____ Elective ____	

The above-named student is approved to study abroad according to the terms listed above.

Faculty Advisor: _____ Date: _____

Magellan Coordinator _____: _____ Date: _____