## **University of Scranton Study Abroad Course Approval Form**

Student Name:			Royal ID Number: Minor(s):						
									_
						Business Leadership:			_
University Abroad/Study Abroad Program:  *Students complete shaded region International University Name:				Semester/Term Abroad:  ** Internal Use Only Please Leave Empty  The University of Scranton					
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Course Prefix and Number	Course Name	Credits	Grade Received	Course Prefix and Number	Course Name	Credits	Area	Chair, Advisor, Other Reviewer Initials	**Approved For Transfer/ Transcription**
Major/2nd Major/Minor/Cognate Courses				Major/2nd Major/Minor/Cognate Courses (Chair of Major(s)/Minor(s)/Advising Center)					
General Education/Free Elective Courses				General Education/Free Elective Courses (CAS Associate Dean/GE Coordinator approval subject to review)					
			-						
Language Courses				Language Courses (Chair World Languages and Cultures)					
Signatures	Student	_	_ Date	_	CAS Associate Dean/0	GE Coordinator			Date
	Advisor	-	Date	_	Chair/Second Major/N	Minor/Concentration	1		Date
	Honors/SJLA/BLDR Director	-	Date	_	Chair: Language Depa	rtment for Language	Major/Mino	or Courses	Date