

GS APPROVAL FORM FOR SEE-U

All GS students must be approved to study abroad by the GS study abroad advisor. You will only be allowed to participate in this program if you have completed at least one semester at GS in good academic and disciplinary standing. Approval will be automatically rescinded if you fail to meet these conditions prior to your departure. Please be sure you have submitted all application materials to the SEE-U program by the appropriate deadlines.

You must complete this form fully and submit it to the GS study abroad advisor no later than May 1st.

Name _____ UNI _____

Phone _____ GS Advisor _____

Expected Graduation Year 20_____ May October February

Major _____ Concentration _____

U.S. Citizen yes no Citizenship: _____ Joint Program Student yes

How many semesters have you completed at GS? _____

How many points of transfer credit have you been awarded by GS? _____

How many points of credit have you completed at GS to date? _____

What is your current cumulative GPA at GS? _____

Have you previously been on a GS-approved study abroad program? yes no

If yes, when and to where? _____

If you have taken any previous science classes -- at Columbia or elsewhere—please list them below.

Course _____ Course # _____ Term/Year _____ Grade _____

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List below the SEE-U Program you plan to attend.

I have been accepted to this program and the letter/email of acceptance is attached.

I have not yet been accepted to this program. I expected to hear from the program by _____
(As soon as acceptance is received, please notify vk2104@columbia.edu).

Are you intending to have these SEE-U courses count toward your major? yes no

Have you discussed these study abroad plans with your major department? yes no

Academic and Disciplinary Standing. If you answer yes to either question, please attach an explanation, noting your current standing.

Have you ever be on academic probation? yes no

Have you ever been on disciplinary probation? yes no

Some programs and countries are more capable than others of meeting special needs of students. Please indicate below any special needs you have that will help us in advising you about the selection of appropriate programs.

- Non-U.S. Citizen Citizenship _____ U.S. Visa Status _____
 Disability Are you registered with Disability Services? yes no
Do you have an accommodation? yes no
- Financial Aid
 Dietary Needs
 Religious Needs
 Medical Needs/On medication
 Married; children yes no Do you intend for your family to be with you on this program? yes no
 Other special needs we should know about:
 Military Veteran
 Health Insurance

****EMERGENCY CONTACT****

Please provide us with an emergency contact for while you are out of the country:

Emergency Contact Name

Relationship

Emergency Contact Street Address

City, State, Zip

Emergency Contact Phone

Emergency Contact Email Address

To the GS student:

By signing below you acknowledge that all the information you have provided on this form is correct.

Signature

Date

To the GS Study Abroad advisor:

By signing below you acknowledge that this student is in good standing and currently meets the GS eligibility requirements for study abroad.

Signature

Date