Farmingdale State College

OVERSEAS ACADEMIC PROGRAM
COURSE PRE-APPROVAL FORM

STUDENT INFORMATION

NAME:_____ RAM ID #:_____MAJOR:_____

.EDU EMAIL:_____ CELL #:_____

PROGRAM INFORMATION

TERM: FALL | THANKSGIVING BREAK | WINTER | SPRING | SPRING BREAK | SUMMER | ACADEMIC YEAR CITY & COUNTRY:_____

COORDINATING SUNY:_____ SCHOOL ABROAD (IF NON-FACULTY LED):_____

COURSE INFORMATION FOR NON-FACULTY LED PROGRAMS

	Student: Course # and Title Abroad	Credits	**Dept. Chair:** FSC Equivalent Course # and Title	**Dept. Chair:** FSC Credits	**Dept. Chair:** Signature approval for course equivalent (if applicable)	**Dept. Chair:** Course satisfies graduation requirements Y/N
1.						
2.						
3.						
4.						
5.						
6.						
7.						

TOTAL CREDITS:_____

COURSE INFORMATION FOR FACULTY LED PROGRAMS

	Student: FSC Course # and Title	Credits	**Dept. Chair:** Course satisfies graduation requirements Y/N
1.			
2.			

TOTAL CREDITS:_____

STUDENT – Read, initial and sign below.

1. I understand that without the completion of this form I will not be able to participate in any Study Abroad, Exchange or Out of State program. _____
2. I understand that without this form being signed by all necessary persons my enrollment is not valid. _____
3. I understand that I need to achieve a minimum grade of "C" in order to receive transfer credit. _____
4. I understand that the credits may not transfer back to FSC without having completed this form. _____
5. *I understand that _____ credits I plan to take on this program will *not* apply to my degree at FSC. _____

**if applicable*

Student's Signature:_____ Date:_____

Student's Curriculum Chairperson Signature Approval:_____ Date:_____

Student's Curriculum Dean Signature Approval:_____ Date:_____

Last updated: May 2019