



**institute of spanish studies**  
El Bachiller 13  
46010-Valencia (Spain)

# Institute of Spanish Studies

## Study Abroad

### STUDY ABROAD APPROVAL FORM

**To the student:**

Name \_\_\_\_\_ Program \_\_\_\_\_ Term/year \_\_\_\_\_

E-mail \_\_\_\_\_

Please sign the authorization and give this form to study abroad adviser or other appropriate person your campus. Then forward the completed form to the Institute of Spanish Studies

I formally apply to the above named program and authorize the release of information to complete this application.

I request that a transcript of my work be sent automatically to my home campus on completion of this program.

I waive my right of access to this information.                      I do not waive my right of access to this information.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_

**To the academic dean, study abroad adviser or faculty adviser:**

Is this student in good academic standing?    Yes    No

Has the student completed the necessary steps for approval from your institution?    Yes    No

Do you recommend this student?    Yes    No

Will the credit earned on the program be accepted toward this student's degree program at your institution?

Yes, under the usual transfer policies.

Comments:

Name \_\_\_\_\_ College/University \_\_\_\_\_

Address \_\_\_\_\_

Title/Department \_\_\_\_\_ E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_