INTERNATIONAL OFFICE APPROVAL FORM

NOTE: This form must be completed by your study abroad advisor, exchange coordinator, or an appropriate individual in your home school's international office.

TO BE COMPLETED BY THE STUDENT

Applicant’s Name: _______________________________ Home Institution: _________________________

A recommendation writer should be aware that the Family Educational Rights and Privacy Act (“FERPA”) permits the student to inspect recommendations unless he/she has signed the waiver below. The undersigned student hereby waives his/her right to inspect this form.

Student’s Signature: ___________________________________________ Date: __/__/_____

TO BE COMPLETED BY THE STUDY ABROAD ADVISOR OR OTHER UNIVERSITY OFFICIAL

The application for the above named student will not be complete until we receive this form indicating institutional approval of this applicant’s study abroad plans and your comments, if any, about the applicant.

1. Is this student a full-time undergraduate in good standing at your institution?
   □ Yes □ No (please attach explanation)

2. Has this student ever been on academic probation?
   □ Yes (please explain) □ No

3. Has this student secured the necessary approval from your institution to study abroad?
   □ Yes □ Approval is not necessary □ No (please attach explanation)

4. Would you recommend this student for an exchange placement at Creighton University?
   □ Yes □ Yes, with reservations (please attach explanation of reservations) □ No

5. Does this student have a disciplinary record with your institution?
   □ No Record □ Yes (an official report is enclosed) □ I do not have access to that information, but such information can be requested from ________________________ (indicate which office at your institution maintains these records and include their contact information).

6. Will credits earned by this student in the above named study abroad program be accepted towards the student’s degree program at your institution?
   □ Yes, transfer credit is guaranteed.
   □ Yes, but final approval cannot be granted until after the student completes the program.
   □ Yes, but subject to the conditions listed on the reverse side.
   □ No, for the reasons listed on the reverse side.

Name: __________________________________ Position: _____________________________________
Department: ______________________________ Institution: ________________________________
Address: __________________________________________________________________________
Phone: _____-_____-_______ E-mail Address: ____________________________________________
Signature: ___________________________________________ Date: __/__/_____

Global Engagement Office  Creighton University  2500 California Plaza  Omaha, NE 68178  (402) 280-2221