

APPROVAL FOR HOLLINS-AFFILIATED ABROAD COURSE

Section A: to be completed by the Student

Please also attach a course description and/or syllabus and return this form to the Registrar's Office.

1. Name of institution or program: _____
 2. Course subject/number: _____ Host program credits/units: _____
 3. Course title: _____
 4. Check all that apply:
 - Count for free-elective credit
 - Count for major credit Major _____
 - Count for minor credit Minor _____
 - Count for ESP perspective Perspective _____
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Section B: to be completed by the Registrar

1. ____ Course not approved for transfer.
2. ____ Course approved as ____-level free-elective transfer credit.

Registrar signature: _____ Date: _____

To be completed by Department Chair: (if necessary)

3. ____ Course approved to count as a _____ major / minor requirement:
- Course level? 100 200 300
 - Course equivalent? _____

Department Chair signature: _____ Date: _____