

PERSONAL INFORMATION	
Student Name:	PLU ID:
Major(s):	Minor(s):
Study Away Program:	Term/Yr of Study Away:
Program type: <input type="checkbox"/> Gateway <input type="checkbox"/> Featured <input type="checkbox"/> Approved	Term of Expected Graduation:
Are you studying away during your last semester at PLU? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, do you plan to walk at commencement? <input type="checkbox"/> Yes <input type="checkbox"/> No

I understand how my study away courses can be applied to degree requirements. Any course not listed on this form will be applied as General Elective credit.

Student signature:	Date
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Wang Center use only Staff Initials: _____ Date: _____

If you want to fulfill:	Meet with:
Major requirements	Major department chair
Minor requirements	Minor department chair
General Education requirements	See Registrar's Office online form: https://forms.gle/tir6HuqwSzWd87FN7
IHON 200-level elective (only one permitted)	No signature required
General electives only	No signature required

COURSES THAT FULFILL MAJOR REQUIREMENTS

Host course number	Host course title	Host credits	PLU equivalency (ex: HISP 322, THEA 330, BIOL 350)	Est. PLU credits	What requirement is fulfilled? <u>Be specific:</u>	Approval: Department Chair signature	Chair only: Include in PLU Equivalency Guide/MAP?
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No

COURSES THAT FULFILL MINOR REQUIREMENTS

Host course number	Host course title	Host credits	PLU equivalent (ex: HISP 322, THEA 330, BIOL 350)	Est. PLU credits	What requirement is fulfilled? <u>Be specific:</u>	Approval: Department Chair signature	Chair Only: Include in PLU Equivalency Guide/MAP?
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No
						Name of Dept Chair _____ Signature: _____ <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)	<input type="checkbox"/> Yes <input type="checkbox"/> No

COURSES THAT FULFILL GEN ED/IHON REQUIREMENTS

Host course number	Host course title	Host credits	Gen Ed/IHON (Specify: SO, NS, AR, etc.)	Est. PLU credits	Gen Ed Approval: submit Registrar's Office Form: https://forms.gle/tir6HuqwSzWd87FN7 IHON: One 200 level elective granted. For additional IHON credit contact IHON Director
			<input type="checkbox"/> GenEd: _____ <input type="checkbox"/> IHON 200 level		<input type="checkbox"/> I am seeking a new approval (see instructions above) <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)
			<input type="checkbox"/> GenEd: _____ <input type="checkbox"/> IHON 200 level		<input type="checkbox"/> I am seeking a new approval (see instructions above) <input type="checkbox"/> No signature required (check if an equivalency is on the Interactive Guide and/or MAP)

GENERAL ELECTIVE COURSES

Host course number	Host course title	Host credits

Please sign once form is complete to indicate you have reviewed the study away course plan with your advisee.

Student Name: _____

Major Advisor	Print Name	Signature	Date	Comments
Minor Advisor	Print Name	Signature	Date	Comments