

University of Massachusetts Boston Study Abroad/Exchange Programs 100 Morrissey Blvd Boston, MA 02125 617-287-3961

Request for Prior Approval of Transfer Credit of Study Abroad Programs

Mailing Address______Home Tel ()_____

Student ID#_

This form is used to request credits for courses taken abroad as part of a recognized international educational exchange or study abroad program. To facilitate the transfer credit you must complete this form indicating each course for which you would like to receive major, distribution credits, or elective credits.

Cell Phone No. ()Email:			Major:		
Dates of proposed study, Winter:		Spring:		ummer:	Fall:
Study Abroad Provider:		Naı	ne of Academic	institution:	
Country:					
 Instructions: Please complete all the approached courses used for major credit credits. Study Abroad must not exce A separate prior approval for 	it must have a ded one academ	dept. Facul	ty signature, and	ters)	edit value of 3 or 4 US.
Study Abroad Course Title	Course No	Credits	Dist/Major	UMB Equivalency & Number	
Signatures					
					Date:
1. Transfer Credit Evaluator/Admissions				Print Name	
					Date:
2. Department Chair				Print Name	
					Date:
3. International/Exchange Coord			Print Name		
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