Study Abroad Advisor Approval Form

The purpose of this form is to verify that you have approval from your home institution to participate in NYU Study Abroad. Your application cannot be considered until the NYU Office of Study Abroad Admissions receives this completed form. Please fill out the Student Information section and then submit this form to your dean, study abroad advisor, academic advisor, or other campus official responsible for approving study abroad.

**STUDENT INFORMATION**

Name: ___________________________ NYU Program: ___________________________

Current Address: ___________________________ ___________________________

Phone: ___________________________ Email: ___________________________

Study Abroad Period: Fall 20□□ Spring 20□□ Academic Year 20□□-20□□

Current Home Institution: ___________________________________________________

I hereby authorize the release of information needed to complete this form to the campus official responsible for approving my program of study.

Student Signature __________________________________________ Date _____________

To the Dean, Study Abroad Advisor, Academic Advisor, or Campus Official responsible for approving study abroad programs:
The NYU Study Abroad Application for the above named student will not be complete until we receive this form indicating institutional approval and your comments, if any, about the applicant’s plan to study abroad. Due to application deadlines, your prompt response will be appreciated. Please return this completed form to the address listed below.

Is this student in good academic standing? □ Yes □ No If no, please explain:

________________________________________________________________________

Does this student have a disciplinary record with the institution?
□ No □ Yes, official details are enclosed □ I do not have access to that information

Will the credits earned by this student through the NYU Study Abroad program be accepted toward their 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 departmental conditions: __________________________________________________________

□ No, for the reasons listed: __________________________________________________________

To the best of your knowledge and understanding of the abilities needed to succeed in a foreign country, do you recommend this student for study abroad?
□ Yes □ Yes, with reservations (comments enclosed) □ No, I do not personally know this student

If you have any additional comments, feel free to attach a separate sheet on letterhead. Thank You.

Name: ___________________________ Title: ___________________________

(Please print) Institution Name: ___________________________ Phone: ___________________________

Email: ___________________________ ___________________________

Signature of Academic Official ___________________________ Date _____________