



## INBOUND EXCHANGE STUDENT - COURSE PERMISSION LETTER

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### Section 1: Personal Information

Last name:

First name:

Student ID #:

E-mail:

### Section 2: Academics

Current Program:

Home Institution:

Level of Studies:  Undergraduate  Graduate

Period of Study  Fall 2022  Winter 2023

**Proposed Courses for Study:**

(Please list in priority order by course number & name, at least 6 possible courses for each given semester)

<b>Fall 2022</b>	<b>Winter 2023</b>
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.

**Home University School /Faculty/ Department Advisor**

The above-mentioned student is in good academic standing.

The student has Faculty/ School/ Department permission to take the above-mentioned courses.

Advisor Name: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Professional Title: \_\_\_\_\_

Contact E-Mail: \_\_\_\_\_

Date \_\_\_\_\_(MM/DD/YYYY)

Home University Stamp

