



Study Abroad Application

BILATERAL EXCHANGES
PREFERRED COURSE SELECTIONS

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PART 1

Student Name _____
Last First Middle/Maiden Preferred
Academic Year _____ Semester _____ Fields(s) of Study _____
Academic Advisor _____
Host Institution _____

PART 2 Please list specific courses that you would like to take at the Host Institution. It is recommended that you list more courses than you plan to take in case a course is not available or full at the Host Institution.

Please fill out one form for each of the institutions you list on your application:

COURSE NUMBER	COURSE TITLE	NUMBER OF CREDITS/HOURS

AGREEMENT

I have discussed my proposed program with the appropriate faculty and advisors, and have approval for the academic program outlined above. I understand that course prerequisites at the Host Institution must be met and that course registration at the Host Institution is based on the availability of offerings and cannot be guaranteed.

Signature of Applicant: _____ Date (dd/mm/yyyy): ____/____/____