Washington College
INTERNATIONAL PROGRAMS

Course Information Sheet

Students must meet with their academic advisor to select all courses.
Your academic advisor should sign this form FIRST.

Name of Applicant_____ Sex: ____F ___M
Last First Middle

Program or University you plan to attend:_____

Location of Study Abroad site:_____
City Country

• Time period of your program abroad - check appropriate semester or session and list year:

Fall semester/Year:_____ Spring semester/Year:_____ 1 academic year/Year:_____

Summer Session/Year:_____ Winter Session/Year:_____

Have you declared a major? Y/N__List major(s):_____

List courses (four or five), in order of preference, including internships. Also list at least two alternate courses per semester. If you are attending a joint program in which the course you wish to take appears in the WC catalog, please enter that WC equivalent number in the space provided, you do not have to get the signature of the department chair, your advisor can sign off on it.

Host institution or program course number and title	WC equivalent **(Do not leave blank)**	Signature of Department Chair*****

*By approving this course you are confirming that it is equivalent to a Washington College course and that upon completion, the credits for this course will transfer to Washington College.

Faculty Advisor:_____
Signature Print Name

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