STUDY ABROAD APPROVAL FORM

This form must be mailed, emailed or faxed to:
IAU - U.S. Office
409 Camino Del Rio South, Suite 303
San Diego, CA 92108
Tel. 800 221-2051 • Fax. 847 864-6897
Email: enroll@iaufrance.org • www.iaufrance.org

To be completed by applicant (please print clearly or type)

Name (First, Middle, Last) ____________________________________________
___________________________________________________________________________________
College/University __________________________ City _________________________ State__________________

Applying for entrance: ☐ J-Term 20____

☐ Aix-en-Provence ☐ Mediterranean Basin
☐ American Diplomacy ☐ Mediterranean Ecology
☐ Environmental Security ☐ Moroccan Studies
☐ Europe & the Islamic World ☐ Shakespeare and the Theatre
☐ Great Cities ☐ Wine, Gastronomy, & Tourism
☐ International Business

Course Preferences

Before selecting your courses, please refer to the course schedule at https://iaufrance.org/studyabroad/programs/jtermcourses.

All Students
Please list your first program & course choice, plus one alternate. Consult with the academic advisor at your home institution for approval of all selections. Upon acceptance, students will be asked to confirm their choices. We ask you to select alternate classes because classes you have chosen may be filled. Please contact rebecca.coyle@iaufrance.org with questions regarding course selection.

Preferred Program: ___________________________________________
Preferred Course: ___________________________________________
Alt. Program: ___________________________________________
Alt. Course: ___________________________________________

Early Start

Learn more about IAU’s Early Start Program at https://iaufrance.org/studyabroad/programs/aix/esp.

All Students
Please let us know if you are interested in signing up for IAU’s Spring Semester Early Start Program. Please contact enroll@iaufrance.org with questions regarding the program.

☐ Yes, please enroll me in the program.
☐ No, not at this time.
☐ I’m not sure yet.

Spring Semester

Learn more about IAU’s spring semester courses and programs at https://iaufrance.org/studyabroad/programs/aix/academics/semestercourses.

All Students
Please let us know if you are interested in enrolling in on of IAU’s Spring Semester Programs. Please note that students who enroll in the J-Term + Spring Semester automatically receive a $500 grant towards their spring semester tuition. Please contact enroll@iaufrance.org with questions regarding the program options.

☐ Yes, please enroll me in the program.
☐ No, not at this time.
☐ I’m not sure yet.
**Study Abroad Approval**

This section is to be completed by the individual who has the authority to approve this student’s application to study abroad with IAU.

Is this student in good academic standing? ☐ Yes ☐ No

If no, please explain. _____________________________________________________________________________________________________
_______________________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________

Has this student secured the necessary approval from your institution to study abroad?
☐ Yes ☐ Approval Not Necessary ☐ No

If no, please explain. _____________________________________________________________________________________________________
_______________________________________________________________________________________________________________________
_______________________________________________________________________________________________________________________

Will the credit earned by this student at IAU be accepted toward this student’s 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 the following conditions: ____________________________________________________________________________________________
☐ No, for the following reasons: ____________________________________________________________________________________________

Do you recommend this student? ☐ Yes ☐ Yes, with reservations (attach explanation of reservations) ☐ No

If you have additional comments, you may attach a separate sheet of letterhead. Thank you.

Dr/Mr/Mrs/Ms (please print) ____________________________________________________________________________________________________

Position/Department ____________________________________________________________________________________________________________

Institution ___________________________________________________________________________________________________________________

Address _______________________________________________________________________________________________________________________

City ____________________________ State ____________________________ ZIP Code ____________________________

Tel. ______________________________ Email ______________________________