2017-18 DOMESTIC EXCHANGE PROGRAM APPLICATION

Please type or print in ink

LAST DAY TO SUBMIT APPLICATION TO THE OFFICE OF THE REGISTRAR: MARCH 3, 2017

APPLICATION AT WEB SITE:

http://registrar.ucsc.edu/enrollment/special-programs/domestic-exchange.html

1. Student Name _____
first middle last

2. Student ID Number _____ 3. Birthdate _____

4. College _____ 5. Major _____ 6. Total credits (include current qtr) _____

7. Class Level Fr ☐ So ☐ Jr ☐ Sr ☐

8. Mailing Address _____
number street city state zip

_____
telephone number e-mail

9. Permanent Address _____
number street city state zip

_____
telephone number

10. I expect to receive UCSC financial aid during the exchange period. Yes ☐ No ☐

11. Please check your preference

UNIVERSITY OF NEW HAMPSHIRE	UNIVERSITY OF NEW MEXICO
☐ 2017-18 Academic Year	☐ 2017-18 Academic Year
☐ 2017 Fall Semester Only	☐ 2017 Fall Semester Only
☐ 2018 Spring Semester Only	☐ 2018 Spring Semester Only

Please complete page 2 and the Proposed Course Study Plan.

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Describe your interest in the University of New Hampshire or the University of New Mexico and your expectations regarding a period of study there next year. Please include your assessment of how the academic experience will assist you in completing your graduation and major requirements.

Student Signature _____ Date _____

Submit to the Registrar's Office (190 Hahn Student Services) your completed application, and your Proposed Course Study Plan approved by your Department and College, by March 3, 2017.

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PROPOSED COURSE STUDY PLAN

All students applying for the Exchange Programs at University of New Hampshire and University of New Mexico must obtain the approval of their Department and College. Please note: The college *should not approve this form without prior approval of the Department*. This approval serves to assess whether or not the exchange experience will have a negative impact upon the participant's progress toward graduation.

Student Name _____
first middle last

Student ID Number _____ Major _____ College _____

Date of Declaration _____ Planned Graduation Date _____

GENERAL EDUCATION REQUIREMENTS COMPLETED

CC _____	SR _____	PR-C _____
ER _____	TA _____	PR-E _____
IM _____	PE-E _____	PR-S _____
MF _____	PE-H _____	C1 & C2 _____
SI _____	PE-T _____	DC _____

MAJOR REQUIREMENTS COMPLETED

_____ _____

_____ _____

_____ _____

_____ _____

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WORK IN PROGRESS/WORK PLANNED PRIOR TO EXCHANGE

Courses in Progress	Courses Planned

WORK PLANNED DURING EXCHANGE

List five to 10 courses which you are interested in taking while on exchange. With an asterisk (*) indicate which of these you intend to apply toward your UCSC major as an upper-division course. Please list the department and course number.

WORK PLANNED FOLLOWING EXCHANGE

List the courses you plan to take upon return to UCSC. Indicate in parentheses ( ) the quarter during which you intend to take each course. Use additional paper if necessary.

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DEPARTMENT APPROVAL

☐ The Department **approves** Exchange Program participation for this student.

☐ The Department **does not approve** Exchange Program participation for this student.

Department Adviser (please print) _____

Signature of Department Adviser _____ Date _____

Telephone _____ Email _____

COLLEGE APPROVAL

☐ The College **approves** Exchange Program participation for this student.

☐ The College **does not approve** Exchange Program participation for this student.

College Adviser (please print) _____

Signature of College Adviser _____ Date _____

Telephone _____ Email _____

Submit to the Registrar's Office (190 Hahn Student Services) your completed application, and your Proposed Course Study Plan approved by your Department and College, by March 3, 2017.

Office Use Only

☐ The Domestic Exchange Commission **approves** Exchange Program participation for this student.

☐ The Domestic Exchange Commission **does not approve** Exchange Program participation for this student.

Date _____