

BEMIDJI STATE UNIVERSITY
Study Abroad Agreement
 TRANSFER CREDIT APPROVAL/REGISTRATION FORM

International Services
 Deputy Hall 103
 218/755-4096

This sheet is required if the student will be registering for courses at the host/cooperating institution and transferring those credits back to Bemidji State University. (Complete one sheet for each term.) It is required that the equivalencies be determined prior to student participation in the program if possible.

Student's Name: _____
 Host Institution: _____

BSU ID# _____
 Term: _____ Year: _____

The following transfer course equivalencies will be granted to program participants upon successful completion of the courses at the host institution. Only courses numbered above a 100 or 1000 level, in which the student earns a "C" or better will be transferred. An official transcript from host institution must be received by BSU prior to the courses being transferred and grade recorded.

Complete the following for courses at Host Institution:

| Host Course Title/Number | Department | # Credits | | Equivalent BSU Course Title/Number | Dept | # Credits | Lib Ed Area (if applicable) | Course ID |
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Signature of Department Chair: _____ Date: _____

Signature of Registrar: _____ Date: _____