

STUDENT & PROGRAM INFORMATION

To be completed by the student	
First Name	Last Name
Home Institution	Year in School
Wesleyan Study Abroad Program	Term Abroad (Semester, Year)
PARTICIPATION APPROVAL	
To be completed by the student's study abroad office	
Has this student secured the necessary approval fro	m your institution to study abroad?
Is this student in good academic standing?	
Does this student have a disciplinary record with you	ur institution?
If any of your answers above require further explana	ation, please include that information below:
To whom / what office should Wesleyan University send the	nis student's transcript at the conclusion of their program?
Student participation approved by:	
Name	Title
Office	Institution
Email	Signature