**Office of International Programs (OIP)  
STUDY ABROAD REGISTRATION FORM**

**Spring 2024**

410-617-2910 or 410-617-2920

**First Name:** Click or tap here to enter text. **Last Name:** Click or tap here to enter text.

**Student ID #:** Click or tap here to enter text. **Study Abroad Program:**

**Major:** Click or tap here to enter text. **Minor:** Click or tap here to enter text.

**Sellinger Scholar:** Yes No **Honors:** Yes No **Class Year:** Choose an item.

List **in order of importance** your first-choice schedule directly below. Only list 5-3 credit courses, plus labs or 1 or 2- credit courses

(e.g., music courses). Sixth (6-3 credit) courses will not be processed on designated registration days. All students can register for a 6th course **starting November 10, 2023** with major advisor’s permission. **Complete pages 1, 2 and 3 of the registration form. This is page 1. This entire form (all 3 pages) is due October 13 2023.**

**EX. of how to complete the form below:**

**Ex. MG 402 01 Strategic Managment Smith 3 MG201 Yes/No Fall**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Dept** | **Course #** | **Sec #** | **Course Title** | **Instructor** | **Cred** | **Prerequisite(s) for the course** | **Have you**  **fulfilled the prerequisite(s)?** | **If yes, what semester(s) was it taken** |
| **1** |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |
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| **7** |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |

**Courses that require permission (electronic or email) from the instructor (student must obtain permissions) write below:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Signature:**  **Date:**

I acknowledge that by typing my name above, I am authorizing personnel at Loyola University Maryland to process my registration of the courses listed on the form or authorizing them to assist me with registration if problems occur. If I need to submit another registration form, I will have to sign the updated registration form giving authorization to the Office of International Programs. If I fail to sign the updated registration, by submitting it to the Office of International Programs, I am giving them authorization to process my registration form or authorizing them to assist me with registration if problems occur.

If any of the above courses is closed or unavailable for other reasons noted in the registration letter, list in order **of importance** course alternates you need or want to take. It can be the same course at a different time or an entirely different course. **Let us know if you want us to put you into an open section below**. **This is page 2. Note the example in the first box.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Dept** | **Course #** | **Sec**  **#** | **Course Title** | **Cred** | **Instructor** | **Prerequisites for the course** | **Have you**  **fulfilled the prerequisite(s)?** | **If yes, what semesters was it taken** | **If**  **unavailable, put into an**  **open**  **section that works** |
| **Ex.**  **MG** | **Ex.**  **402** | **Ex. 06** | **Ex.**  **Strategic Management** | **Ex. 3** | **Ex.**  **professor** | **MG201** | **yes** | **Fall 23** | **Ex.**  **Yes** |
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If you received 5-3 credit courses but you are not satisfied with your schedule, you will be responsible for making any changes to your schedule. Students can add/drop classes in Student Planning beginning registration day through September 8th, 2023.

***\*\*You must complete this form.*** *It is meant to verify prerequisites for registration and to help the graduation auditor. Let us know* ***immediately*** *if you make* ***any*** *changes to your schedule abroad.*

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| |  |  | | --- | --- | | **Name of Int. Program:** |  | | **Student Name:** |  | | **ID number:** |  | | **Class:** |  | | **Major:** |  | | **Minor** |  | | |  |  | | --- | --- | |  | **Provisional Academic Report** | | OFFICE USE ONLY: | **OFFICE USE ONLY:** | | Double counts: |  | | Comments: |  | | Total # of credits  @ Loyola |  | |

**List the courses you are currently taking abroad:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Course code # abroad: | Course title abroad: | # of credits abroad: | What requirement do you expect to fulfill at Loyola University Maryland with this course? Be as specific as possible. Indicate double counts if applicable. | **OFFICE USE ONLY:**  -Loyola equivalent, # of credits at Loyola, etc. |
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