

## APPLICATION FOR STUDY AWAY – U.S. ONLY Deadlines: April 1 for Semester I December 1 for Sem

**December 1 for Semester II** 

NAME:						ID:		CLASS:	
							during the 20	Academic Year	
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I unde	rstand, fu	rther, that <b>ap</b>	oroval retroa	ctively	will, in al	l likelihood, <u>N</u>	NOT be granted.		
DEPT NUMBER CO		OURSE TITLE			` '		D DEPARTMENT APPROVAL		
Approved:Student					ent's Advi	nt's Advisor		 Date	
Appro	oved:								
Approved:Student's Dean  **Obtain this signature last**							Г	Date	
I have Colleg Dean, complethe request Haver	ges, and I my Advi etion of r quired 19 st, I shall ford Regi erstand, f of 2.0 or	regulations in fully understa sor, and my D my major progued to the control of th	the Haverford and College respectively. The performant Haverford from the of my major CIAL transcriding.	d Colleg quirement air regal Ford as verdeparting pt of my	ge Catalogents regardered as the ment. Up y grades so the above ford, and	g (p.39) regarding such studes uitability of a completion of on successful tent directly from the plan without the grad	ding study at other dy. I have also co such study toward of my distribution completion of this com the host institute at proper approval de(s) received will	nsulted with my I both the requirements and s approved ution to the	
Student's Signature							Г	 Date	