Study Abroad
Enrollment Verification Form

Study Abroad Student,

As part of the study abroad pre-departure process, you completed a Study Abroad Course Equivalency Form on which you received preliminary approval of the courses that you planned to take abroad. The course approval form, however, is not a guarantee of course availability or enrollment at the host institution. This is why we place you in the CIED 4116 “placeholder” course for however many credits you’ve planned to take while abroad.

This enrollment verification form confirms the courses in which you are officially registered at the host institution. The completion of this form assures that you maintain full-time enrollment, maintain eligibility for your CSU scholarships, Veteran Educational Benefits, Tuition Assistance and Financial Aid (does not guarantee), maintain your class standing and relevant course prerequisites for registration purposes, and will ease the transcript articulation process once your grades are received at the conclusion of your program.

Please have the appropriate coordinator at the host institution email the form directly to the Center for Global Engagement, studyabroad@columbusstate.edu, by the following deadlines:

This form must **should be completed and submitted to the CGE within 2 weeks of your arrival in-country for the start of the term.**

**Form Procedures**

1. Student completes sections 1 and 2.
2. Student acknowledges policies related to study abroad enrollment verification in section 3.
3. Student submits form to Host Institution Coordinator for verification, section 4.
4. The Host Institution Coordinator emails the approved Enrollment Verification Form directly to the CSU Center for Global Engagement via email to studyabroad@columbusstate.edu.

If you have any questions or concerns, please feel free to contact the CGE at 706-507-8545.
Student’s Name: _________________________ Student ID Number: __________

Email Address: _______________________________@columbusstate.edu

Study Abroad Program Name: _________________________________

Semester (fall/spring/summer and year): ________________________________

I understand and acknowledge that:

- I am enrolled in the courses listed above.
- I will submit a revised version of this form if there are any changes to my registration upon return to Columbus State University.
- Students participating in fall/spring study abroad programs must enroll for the equivalent of a full-time course load while abroad. For summer programs, there is no minimum credits required, unless otherwise specified by your host institution or program.
- This form will be shared as proof of enrollment with the Department of the Registrar, Military Enrollment, and Financial Aid at CSU.
- Students who do not submit this form may be in jeopardy of losing their financial aid, veteran educational benefits, or tuition assistance.
- This verification does not guarantee courses will transfer to Columbus State University – such decisions are made on the Course Equivalency Form.
- Students should keep copies of all course syllabi, tests, or other written assignments in case any further review of course content is necessary for approval in fulfilling degree requirements.
- Grades for all courses while on CGE-approved study abroad programs will appear on a student’s CSU transcript and factor into a student’s SAP and GPA.

<table>
<thead>
<tr>
<th>Study Abroad Course Title (at Host Institution)</th>
<th>Subject. Number, &amp; Section (if applicable)</th>
<th># of Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Student Signature ___________________________ Date ______________________

I confirm that the Columbus State University student is enrolled in the above courses while abroad.

Host Institution Coordinator (Print Name) _______________________ Date 

Host Institution Coordinator (Signature) ______________________ Email