

To Whom It May Concern:

The student who has presented this document to you is organizing a semester or year long study abroad experience in another country. He/she is required to have all of their proposed courses approved by the Center for Global Engagement and the appropriate department head or Dean.

Please review the attached syllabus and/or course description (**which should be provided by the student**) of the proposed course(s). We ask that you help us in finding a comparable CSU course, which you should list on the Course Equivalency Form.

Please do not list any non-specific or generic CSU equivalents (NURS 3***) as these can not be used for CSU-approved study abroad classes. Please also avoid using independent study classes, although special topic classes are often appropriate. If there are no CSU equivalent classes in the relevant academic discipline, the student will be enrolled in the generic study abroad (CIED 4116) but their DER will have to be adjusted later by the relevant department chair upon return. If you agree to substitute a course taken abroad with a required course at CSU, please list that in the appropriate column on the table – otherwise you can leave it blank or write N/A.

Please note that on the Oxford Visiting Student program, full/major tutorials count as 9 credit hours (3 classes) and half/minor tutorials count as 3 credit hours (1 class).

This student will be registered at CSU under all the courses described on the Course Equivalency Form for the corresponding number of hours they are taking abroad (minimum of 4 classes/12 credits). Once the transcript from the host institution is received by the CGE, the grades will be adjusted which will impact the students' overall GPA. If necessary, the student can also submit any coursework (papers, assignments, tests, syllabi) upon return if a course was only tentatively approved prior to departure. *Once the student has returned from their program, it is their responsibility to update the Course Equivalency Form if they deviated from what was originally approved prior to departure. **Any deviation from the form upon arrival in-country can negatively impact a students' Financial Aid.*** Students can contact Financial Aid if they have additional questions about the impact of changing courses after they have been approved.

In each case, the host institution is a partner university with CSU, and CSU will accept academic credits through a contractual agreement or a Memorandum of Understanding (MOU) between the institution and Columbus State University.

When examining the syllabus, the contact hours and other details may be very different than what you are accustomed to. Please don't hesitate to contact CGE if you require additional information or documentation to aid in making your decision regarding course equivalencies. If you do not feel that there are any appropriate equivalent courses in your department, please let the student know to contact the Center for Global Engagement and the Financial Aid Office to discuss alternative equivalency options.

If you have any questions or concerns, please feel free to contact the CGE at 706-507-8545.

Thank you for your support of study abroad at Columbus State University!

Study Abroad Course Equivalency Form



Student's Name: _____ Student ID Number: _____

Email Address: _____@columbusstate.edu

Study Abroad Program Name: _____

Study Abroad Course Title (at Host Institution)	Equivalent CSU Course Number (NURS 3555)	Substituted for CSU Course Number or N/A	# of Credits	Printed Name of Department Head or College Dean for Course	Signature of Department Head or Dean for Course
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

I understand that any variance from the above listed courses may jeopardize academic credit and negatively impact my financial aid and graduation requirements.

Student Signature

Date

We, the undersigned, have reviewed and approved the student's participation in the above program and the awarding of the CSU course equivalencies listed above.

CSU Faculty Adviser (Print Name)

Date

Adviser Signature

Student's Department Chair (Print Name)

Date

Department Chair Signature

Director of CGE

Date