



# Exchange Student Course Selection and Academic Approval Form

Student Name: \_\_\_\_\_

Home Institution: \_\_\_\_\_

Semester (select one):  Fall  Spring

Please list, **in order of preference**, the courses that you would like to take at Salve Regina University. Make your choices based on the available courses from the [Schedule of Classes](#). Click [here](#). Please **select the appropriate semester when you choose** and make sure your classes have been approved by your [home institution](#).

**Note that not all classes are offered every semester.** Students must take a minimum load of 12 credits in order to be registered as a full -time student and fulfil the terms of their visa.

Proposed Salve Regina University Courses— <i>Completed by Student</i>			SRU Use Only
	Course Title/No.	Credit Hours	Course Available
Sample	Primary course and section <i>MGT 240 -01: Principles of Marketing</i>	3	
	Alternate <i>MGT 300-01: Business Ethics</i>	3	
Course 1	Primary course		
	Alternate (in case primary course is NOT available)		
Course 2	Primary course		
	Alternate (in case primary course is NOT available)		
Course 3	Primary course		
	Alternate (in case primary course is NOT available)		
Course 4	Primary course		
	Alternate (in case primary course is NOT available)		
Course 5	Primary course		
	Alternate (in case primary course is NOT available)		

Total Salve Regina Credit Hours _____
Name of Home institution:
First and Last Name of Advisor:
Signature of Advisor or Institution Stamp