

Academic Planning Form - UCSD  
**EDUCATION ABROAD PROGRAM (EAP)**

Name \_\_\_\_\_ Student ID # \_\_\_\_\_ College \_\_\_\_\_  
Last First M.

Major(s) \_\_\_\_\_ Minor/P of C/Reg Spec \_\_\_\_\_

Quarter(s) of study abroad (circle): summer 20 \_\_, fall 20 \_\_, winter 20 \_\_, spring 20 \_\_

Country \_\_\_\_\_ EAP Program (if more than one per country) \_\_\_\_\_

**Things to think about in filling out this form:**

Do you wish to fulfill requirements for your Major(s)? Minor(s)? GEs?

How flexible are you?

**Courses to be Taken Abroad:** List a full load of courses (titles, not numbers) for your time abroad. Specify in the left-hand column whether you plan to apply them toward your **Major(MA)**, **Minor(MI)**, **GE**, **Program of Concentration(PC)**, **Regional Specialization (RS)**, or **Elective Units (EU)**.

**YOU MUST TAKE COURSE DESCRIPTIONS WITH YOU TO YOUR DEPARTMENT/COLLEGE**

MA, MI GE, PC RS, EU	Course Title (DO NOT USE COURSE NUMBERS) <i>(To be completed by student)</i>	UC Units	Dept. & College Staff/Faculty Comments <i>(Optional)</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Student notes/comments** (e.g. how definite are these course selections; what other courses could you pursue if these courses were not available):

The above information is complete and correct as of this date. I am aware that course offerings in host institutions fluctuate, and that it may be necessary to adjust my program accordingly. Also, I recognize that UCSD academic departments have final authority over what courses taken abroad fulfill major/minor requirements. Finally, I am aware of the UC residency requirements and that requests for waivers of these requirements must be petitioned separately prior to my departure.

\_\_\_\_\_  
**Student's signature**

\_\_\_\_\_  
**Date**

Name \_\_\_\_\_ Student ID # \_\_\_\_\_

**FACULTY/STAFF COMMENTS AND SIGNATURES.** Please clarify college/departmental requirements and recommendations relevant to EAP participation in the comments section below prior to signing. For example, how many courses/units will the department or college accept from study abroad; what types of courses taken abroad are particularly appropriate; what requirements cannot be replaced by a course taken away from UCSD; what courses should not be pursued abroad.

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• The student and I have discussed the above plan in relation to student's major program, including residency requirements. This course of study is approved provisionally, based on course titles and descriptions. Student must petition courses upon return, and submit supporting documentation, including syllabi, reading list, class notes, exams, papers, etc.

**Additional comments:**

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\_\_\_\_\_  
**Major Dept**                      **Faculty/Staff Advisor Signature**                      **Print Name**                      **Date**

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• The student and I have discussed the above plan in relation to student's major/minor program, including residency requirements. This course of study is approved provisionally, based on course titles and descriptions. Student must petition courses upon return, and submit supporting documentation, including syllabi, reading list, class notes, exams, papers, etc.

**Additional comments:**

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\_\_\_\_\_  
**2<sup>nd</sup> Major Dept**                      **Faculty/Staff Advisor Signature**                      **Print Name**                      **Date**

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• The student and I have discussed the above plan in relation to student's minor program, including residency requirements. This course of study is approved provisionally, based on course titles and descriptions. Student must petition courses upon return, and submit supporting documentation, including syllabi, reading list, class notes, exams, papers, etc.

**Additional comments:**

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\_\_\_\_\_  
**Minor Dept**                      **Faculty/Staff Advisor Signature**                      **Print Name**                      **Date**

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• This is a **matriculated student in good academic standing** as of this date. The student and I have discussed the above plan in relation to student's **graduation requirements, including residency requirements.** This course of study is approved provisionally, based on course titles and descriptions. Student must petition courses upon return, and submit supporting documentation, including syllabi, reading list, class notes, exams, papers, etc.

**Additional comments:**

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\_\_\_\_\_  
**Provost Office Academic Advisor Signature**                      **Print Name**                      **Date**