

NOTE: An original and two copies of this application are required. Please photocopy as needed.

Twelve College Exchange Application

Please type or print.

College you wish to attend: _____ Period of attendance: _____

Name: _____ I.D. #: _____ Class: _____

Major: _____ Major Adviser: _____

Home College: _____ E-Mail address: _____

Your college mailing address: _____ Phone: _____

Date of Birth: _____ Social Security #: _____ Circle one: Male Female

Parent's (or Guardian's) name: _____

Address: _____ Phone: _____

Person to be billed for fees: _____

Address: _____ Phone: _____

- Tentative course program you wish to take.
- Please mark with an asterisk those courses you intend to count in the major. It is your responsibility to make sure these courses are acceptable to the major department.
- In the space provided, indicate fall or spring semester. List department, course number, and course title.

First Term: _____

Second Term: _____

Third Term: (Dartmouth) _____

Comments (if any) about course programs. List here any alternate courses for your tentative program.

State briefly but fully your reasons for wishing to take part in the Exchange Program. Be specific about how it will further your educational goals. DO NOT USE AN ADDITIONAL SHEET.

- Are there any courses which, if not offered, would prevent your attending?

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"I hereby authorize exchange of my education records between my home and host institutions. I understand that I may obtain on request copies of any materials exchanged."

Student's signature: _____ *Date:* _____

- Applicant must obtain approval of Chair of major dept. before submitting the application:

Chair of major department signature: _____ *Date:* _____

- Action of home coordinator:
This applicant has approval to attend the institution named for the period _____
His/Her transcript is attached.

Signature: _____ *Date:* _____

- Action of host coordinator: This applicant is accepted: _____ Rejected: _____

Signature: _____ *Date:* _____