



Study Abroad Agreement

UMD Programs

University of Minnesota Duluth

International Education Office

138 Kirby Plaza, 1208 Kirby Drive, Duluth MN 55812

Tel. (218) 726-8764: Fax (218) 726-7352

All UMD students studying abroad are registered at UMD for a block of Foreign Studies credits by International Education Office (IEO) staff.

For the purposes of Minnesota State Grants, 15 credits are considered full-time status, 12 credits are considered federal and institutional full-time status, and 6 credits is considered half-time status.

I understand that a preliminary registration will be completed by IEO for me and wish to be registered for:
[please check one box]

Fall Semester 12 credits 15 credits

Spring Semester 12 credits 15 credits

Short Term Study Abroad Program (please specify): _____

Once a final grade report is received, credit determination is made and UMD credits are assigned. Preliminary registration will be revised to reflect the study abroad courses and their appropriate FSt number. If I receive financial aid, I understand that my aid may be adjusted based on changes in credit load from the preliminary registration. I will be responsible for any re-payment of financial aid resulting from a drop in credits.

Typically study abroad grades are received much later than grades are received at UMD. I recognize that if my study abroad is during my presumed last semester at UMD, the posting of my degree may be delayed if final grades are posted after the end of the UMD semester. Also if the ultimate number of assigned credits is less than the number for which I originally registered, it may be possible that I will have to register for additional UMD semesters to complete degree requirements.

It is my responsibility to provide IEO all necessary course information, including syllabi, in order for staff at UMD to determine course equivalency and degree requirements. If I fail to do so, my graduation may be delayed.

I am responsible for periodically checking my UMD e-mail account, recognizing that information regarding billing, financial aid, and my student status will be sent to me at that address.

Student Signature: _____ Date: _____

Student name (please print): _____