Print Form

(PLEASE TYPE OR PRINT CLEARLY)

Date Provost's Office Received _____ Date Registrar's Office Received _____

APPLICATION FOR STUDY AWAY FROM FISK UNIVERSITY

Coursework taken at other institutions while a candidate for a Fisk degree will not normally be accepted toward graduation unless such work has been approved in advance by the Office of the Provost. Normally, courses in a student's major, minor, cognates, and Core courses cannot be taken elsewhere. Courses approved to be taken elsewhere must be equivalent in character and quality to those offered at Fisk. There must be exceptional justification for taking courses from other institutions to be applied to credit at Fisk.

NAME: _____ SSN: _____ CAMPUS BOX: _____ PH# _____

CLASSIFICATION _____ MAJOR: _____ #SEMESTERS AT FISK _____

TRANSFER STUDENT? YES NO IF TRANSFER STUDENT, HOW MANY CREDITS TRANSFERRED? _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SUMMER ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SEMESTER HOURS THROUGH CURRENT TERM _____ #CREDITS EARNED PREVIOUSLY BY STUDY AWAY _____

NAME OF THE INSTITUTION YOU WISH TO ATTEND _____

LOCATION OF INSTITUTION YOU WISH TO ATTEND: CITY _____ STATE _____ ZIP CODE _____

EXPECTED PERIOD OF STUDY AWAY: SEMESTER/QUARTER/SUMMER _____ YEAR _____

SPECIFIC REGULATIONS GOVERNING CREDIT FOR STUDY AT INSTITUTIONS OTHER THAN FISK ARE:

1. No Fisk University required courses or sequences required for the bachelor's degree may be taken from an institution other than Fisk except by approval of the Office of the Provost. Fisk does not normally award credit toward graduate degrees for courses taken elsewhere after enrollment at Fisk.
2. No course in the student's major field may be taken from an institution other than Fisk unless recommended in advance in writing to the Office of the Provost by the appropriate department, except as specified below.
3. Any student who fails a major course or other University required course shall have one opportunity to take an equivalent course (at the same or higher level) in a school other than Fisk. Students who, due to illness, unavoidable scheduling problems, or other approved reasons, have not had an opportunity to take a needed course at Fisk may also be permitted to do so at a school other than Fisk. In these cases, the usual prohibition against taking major, minor, cognate, and Core courses at other institutions may be relaxed.
4. Twelve (12) semester hours of work taken at institutions other than Fisk will normally be the maximum accepted toward the Fisk baccalaureate degree. Exceptional students, under circumstances approved by the Office of the Provost, may be permitted to exceed the 12-hour limit.
5. Courses approved to be taken elsewhere must be equivalent in character and quality to those offered at Fisk. Specific regulations governing credit for study in institutions other than Fisk can be found in the Fisk Bulletin. A student will receive credit hours only with a grade of "C" or above for approved courses. **The grade is not calculated into the student's GPA.**
6. Attach to this application the following catalog documents from the school you wish to attend: **accreditation and course description(s)**.
7. To assure timely consideration for final approval, this form must be filed in the Office of the Provost, with all appropriate signatures obtained, **no later than the last day of classes in the semester preceding enrollment in another institution**. In addition to the signatures of the academic advisor(s) and the chair(s) of the applicant's major department(s), the chair or a professor of the department of each course proposed to be taken must approve the course to confirm its equivalency to the specified Fisk course.
8. Submit the completed form with the required signatures and attachments to: **Fisk University, Office of the Provost, Cravath Hall, Room 110, 1000 Seventeenth Ave., No. Nashville, TN 37208 Phone: (615) 329-8113 / 329-8681 Fax: (615) 329-8802 / 329-8016.**
9. Upon completion of the course(s), request the school you attend to mail your official transcript directly to the Registrar's Office at Fisk.

COURSE(S) TO BE TAKEN AWAY FROM FISK

COURSE DEPARTMENT/ TITLE AND NUMBER	# CREDIT HOURS		EQUIVALENT FISK COURSE TITLE AND NUMBER	DEPT. CHAIR OR PROFESSOR'S SIGNATURE & DATE	REASON FOR TAKING COURSE(S) ELSEWHERE
	SEMESTER	QUARTER			
1					
2					
3					

REVIEWED BY:

_____ _____

ACADEMIC ADVISOR DATE ACADEMIC ADVISOR (2nd Major) DATE

_____ _____

DEPT. CHAIR OF STUDENT'S MAJOR DATE DEPT. CHAIR OF STUDENT'S 2nd MAJOR DATE

_____ _____

APPROVED BY OFFICE OF THE PROVOST DATE **NOT APPROVED** BY OFFICE OF THE PROVOST DATE

cc: Student, Advisor(s), Major Department Chair(s), Division Director(s), Registrar