



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—Completed by Student			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 _____