

Study Abroad / Visiting Student Agreement

LIU Global functions on a semester system. Students receive a letter grade for each course taken. It is the student's responsibility to obtain the approval from their advisor to study abroad.

(Student Name)	is currently a student in good		
academic standing at	and is re	and is recommended	
as a Study Abroad/Visiting student at LIU Global for the fa	all/spring (circle one) 20_	semester	
at the LIU Global Center located in			
Transcript Request			
A LIU Global transcript is requested for the above student.	Please send to:		
Name of Institution			
Address			
City State	Zip		
Attn:(Any additional transcripts must be requested in writing an	d accompanied by a fee o	f \$7.00 each)	
Faculty Acknowledgement			
Please indicate any specific requirements or equivalencies	needed:		
Dean/ Faculty or Academic Advisor/ Department Head		 Date	

Financial Aid

Students who are matriculated at one school, and wish to attend LIU Global as a visiting student, must initiate a "Consortium Agreement." This agreement is between the two financial aid offices, and determines which school will administer financial aid on the student's behalf. Please contact Susi Rachouh, Global Director of Student Success, at 718-780-4327 or susan.rachouh@liu.edu to start the process.

Student Acknowledgement

Your signature below indicates that you intend to study with LIU Global for the period stated and that you have read, understand and agree to abide by the LIU Global policies (ie costs, insurance requirements, release of liability, refund policies, etc). In addition, it is understood that you will pursue the plan detailed herein, and that substantive changes must be submitted in writing for approval by the appropriate offices.

Student Signature		Date
Mailing Address		
Phone	E-mail	
LIU Global Student ID#		

Please return completed form to: LIU Global 9 Hanover Place, 4th Floor Brooklyn, New York 11201 Tel: 718-488-3409

Fax: 718-780-4325 globalcollege@liu.edu www.liu.edu/global