NOTIFICATION OF INTENT
To Study Abroad on a Non-Partner Program

This form is required if you intend to study abroad in a coming semester or year on a program that is not a CCSU Partner University. Students applying to GlobaLinks, to ISEP, or to any other outside program provider (see below) must submit this form to the CIE as the first step in applying to the non-partner program.

Please check the appropriate box below and follow the instructions that pertain:

☐ GlobaLinks programs
☐ ISEP

Instructions: If you intend to enroll in ISEP or a GlobaLinks program and are a financial aid recipient, your CCSU aid may apply to your costs – see the Office of Financial Aid for details. Approval to study abroad on one of these programs is a 2-step process. After submitting this form, please make an appointment with the International Education Coordinator in the CIE to review the application process. If admitted to ISEP or GlobaLinks, you will not take a leave of absence from CCSU, and you will be required to complete the Study Abroad Credit Pre-Approval form prior to your departure.

By signing this form I understand that credits earned on GlobaLinks and ISEP Programs count as residency credit. As of summer 2013, grades earned on these programs will appear on your transcript and calculate into your GPA.

Please check the appropriate box below and follow the instructions that pertain:

☐ CIEE
☐ AIFS
☐ SIT
☐ Other Program Provider (name of program):
☐ Direct Enrollment – No Program Provider (name of university):

Instructions: If you intend to enroll in a program above (ISEP and GlobaLinks excluded), you must take the following steps: 1) you must complete the Leave of Absence form in the Office of the Registrar prior to your departure; 2) if you are a CCSU financial aid recipient, you forfeit that aid by enrolling in the program above and should inform the Office of Financial Aid of your plans; 3) you must inform yourself of the Registrar’s policies and submit the Transfer Credit Request form, 4) you will make all arrangements pertaining to your study abroad, and 5) you will be responsible for registering online for CCSU courses before returning from your Leave of Absence.

Name: (please print) __________________________________________________________________________
(Last)     (First)

CCSU Email Address: _______________________________________________________________________

Student ID: ___________________ Cell/Home Phone: ____________________________________________

Period of Study:  ☐ Fall 20______ ☐ Spring 20______ ☐ Full Year 20______ ☐ Summer 20______

Study Abroad Location (University/City/Country): ____________________________________________

SIGNATURE______________________________________________________ DATE_____________________

Return this form to:
The International Education Coordinator, Center for International Education
Barnard Hall, Room 123; Fax: (860) 832-2047