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

Thank you for visiting the Center for International Education (CIE). By completing this form you are informing both the CIE and Central Connecticut State University of your intention to study abroad in the coming semester or year on a program this is not on the list of CCSU’s sponsored programs.

Sponsored programs are those that have been authorized for Central students by the State of Connecticut and Central’s faculty. They include programs at our Partner Universities around the world, which allow for the maintenance of your regular financial aid package, or they are Courses Abroad, which are taught by CCSU faculty for “in-residence” credit and, in some cases, allow your financial aid to travel with you.

Your intention to attend a non-sponsored program notifies the CIE that 1) you will be taking a Leave of Absence from CCSU, 2) you will complete the appropriate Leave of Absence form in the Office of the Registrar prior to your departure, 3) you will inform yourself of the Registrar’s policies and procedures regarding the transfer of credit, 4) you will accept responsibility for all arrangements pertaining to your study abroad, and 5) you will be responsible for registering online for CCSU courses prior to your return from your Leave of Absence.

Name: (please print) ______________________________________ (last) ______________________________________ (first)

Student ID: ____________________________________________

Period of Study: ☐ Fall 20______ ☐ Spring 20______ ☐ Full Year (Fall & Spring) 20______

Location. City: ______________________________________ Country: ______________________________

Will you be enrolling directly into the host university abroad? YES______ NO______

If YES, which university will you be attending? ________________________________________________

If NO, what is the name of your program provider? _____________________________________________

____________________________________________________________________________________

In signing below you also agree to inform the Registrar and your Faculty Advisor of your intention to take a Leave of Absence from CCSU for the purpose of study abroad at a non-sponsored program.

SIGNATURE____________________________________________ DATE__________

Return this form to:
The George R. Muirhead
Center for International Education
Bernard Hall, Room 138
Tel.: (860) 832-2040
Fax: (860) 832-2047