

Semester II Courses:

UWI Courses	Host University Courses	FOR OFFICIAL USE ONLY	
		H.O.D. Signature	Date

FOR OFFICIAL USE ONLY

Current Cumulative G.P.A./Grade Average: _____
 (To be completed by Faculty Administrator)

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I recommend that the applicant be permitted to spend :
 SEMESTER I SEMESTER II ACADEMIC YEAR

at the _____ and confirm that the courses to be followed will be
 accepted for credit towards the degree for which he/she is registered.

 (Signature of Dean/Nominee) (Date)

Affix stamp here

I will need housing: ON CAMPUS () OFF CAMPUS ()

Hall of Residence: _____

If not, please provide your intended contact address and telephone number:

 Telephone: _____

How did you learn about the exchange/study abroad programme? (Tick as appropriate):

- Faculty Member Promotional Drive Former Participant
 Admissions Office Campus Notices Other (specify) _____