

Mercer Abroad

**Faculty-led Program Course Audit Form**

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| *In order for a student to be eligible to receive financial aid to support enrollment in this program, it is imperative that we determine how this course will fulfill the student’s degree requirements, whether it be through major or minor requirements, major or minor electives, or elective hours that may be applied to required hours for the degree. Please indicate this in the* **Degree Audit Designation** *section below.* | | | | | | | | |
| **Students:** Complete this form electronically and print it out for advisor signature. Submit the signed document to  the Mercer Abroad office or upload it to your online application profile on the [Mercer Abroad](https://www.mercerabroad.com/index.cfm?FuseAction=Security.ExistingUserLogin) website. | | | | | | | | |
| **SECTION 1:** STUDENT INFORMATION | | | | | | | | |
| FAMILY NAME  Click or tap here to enter text. | | FIRST NAME  Click or tap here to enter text. | | | EMAIL ADDRESS  Click or tap here to enter text. | | | |
| MUID  Click or tap here to enter text. | | MAJOR  Click or tap here to enter text. | | | COLLEGE/SCHOOL  Click or tap here to enter text. | | | |
| STUDY ABROAD PROGRAM  Click or tap here to enter text. | | | | | NAME OF FACULTY MEMBER LEADING PROGRAM  Click or tap here to enter text. | | | |
| **SECTION 2:** COURSE INFORMATION | | | | | | | | |
| **TERM** | **COURSE CODE** | | **COURSE TITLE** | | | | **CREDITS** | **DEGREE AUDIT DESIGNATION** |
| Choose an item. | Click or tap here to enter text. | | Click or tap here to enter text. | | | | Click or tap here to enter text. | Choose an item. |
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| **SECTION 3:** ACADEMIC ADVISOR VERIFICATION | | | | | | | | |
| **Academic Advisors*:***   1. Review the student’s selection of study abroad program course(s) below. 2. Verify that the credit earned through these courses will (or will not) fulfill the student’s degree requirements. 3. Submit any specific concerns or instructions in the *Notes* section. 4. Sign the form to approve the student’s plan. | | | | | | | | |
| ACADEMIC ADVISOR NAME  Click or tap here to enter text. | | | | | | ADVISOR EMAIL  Click or tap here to enter text. | | |
| ADVISOR SIGNATURE | | | | DATE  Click or tap here to enter text. | | ADVISOR PHONE  Click or tap here to enter text. | | |
| **NOTES**  Click or tap here to enter text. | | | | | | | | |