

Form 5: Study Abroad Advisor's Form

The purpose of this form is to be sure that you have approval from your home institution to participate in your Lexia program before you leave to study abroad. Please complete the student portion at the top of this form and have the appropriate study abroad advisor, dean, or chairperson from your home institution complete the second portion below.

Student's Section:

To the student: Please complete, sign, and return this form after you have received the appropriate signature below.

Name _____ Lexia Program Site _____ Session _____ Year _____

Home Institution _____ E-mail _____

☐ I understand the credit transfer policy of my home institution.

Student Signature _____ Date _____

Advisor's Section:

To the study abroad advisor, dean, or chairperson: Please complete and sign the following.

I recommend the applicant for admission to the Lexia International program indicated above. It is also understood that in recommending this student for the program, I:

- ☐ approve the plan of study and consider the work creditable toward our degree.
☐ will consider the work for credit upon the student's successful completion of the program and return to the home institution.
☐ conditions of acceptance:

Name _____ Title _____

Signature _____ Date _____

Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

E-mail _____

Return To:

Admissions Committee
Lexia International
23 South Main Street
Hanover, NH 03755 USA

Tel: 603-643-9898
800-775-3942
Fax: 603-643-9899
E-mail: info@lexiaintl.org