

CERTIFICATION FORM

Name: _____
Last *First* *Middle*

Obtain the required campus approval signatures and college/university seal. Please kindly provide your campus office with a stamped envelope to mail the completed verification form to Asbury University's Global Engagement Office (One Macklem Drive, Wilmore, KY 40390).

Required Approval (Campus Officials Only):

As an authorized signatory of _____, **I HEREBY APPROVE THIS**
College/University

APPLICATION to Asbury University's Study Abroad Program, declaring that the above signatory is a student in good behavioral and academic standing at our institution. My signature and the college/university seal embossed below constitute approval for the above student to apply to the program and, if accepted, to grant course credit toward the applicant's degree program. Should the student's good standing and/or approval from our institution change, we will notify the Global Engagement Office at Asbury University (phone: 859-858-3511). It is understood that the student is required to be enrolled as a full-time student of our institution during participation on the Study Abroad Program. Furthermore, because the visiting student technically remains a student at the home institution, payment for participation is handled through the Business Office of the home institution. All charges must be paid in full by the first day of the semester.

Off-Campus Study or Study Abroad Approval/Signatory *Date*

Off-Campus Study or Study Abroad Approval/Signatory's Name & Title (printed)

Academic Officer's Approval/Signatory *Date*

Academic Signatory's Name & Title (printed)

The above-mentioned campus is a:

- CCC member institution
- CCCU member/affiliated institution
- Non-CCCU or Non-CCC institution*

**If a Non-CCCU institution, please attach home institution's contact information (Registrar's Office, Business/Student Accounts, Academic Officer).*