



GOUCHER COLLEGE
Office of the Registrar

Study Abroad Intent Form

For planning purposes this non-binding form is to be used to indicate your likely preference for studying abroad while at Goucher. Students must submit this form to SAS when registering for spring 2008.

Please **legibly print** your name below.

First Name: _____

Middle Name: _____

Last Name: _____

ID#: _____

Class: _____

Anticipated Study Abroad Year(s) and Term(s): _____ FA WN SP SU
Year(s) (Please circle)

Student Signature Date

Advisor Signature Date

INDICATING THE TYPE OF PROGRAM IS OPTIONAL:

Intensive Course Abroad (ICA): Winter _____ Summer _____

Goucher Semester Program Name: _____

Goucher Year Program Name: _____

Non-Goucher Program Name: _____