

Outgoing Undergraduate Student Exchange Permission Form (OUSEP)



Once your exchange has been approved by the International Office, this form must be completed and returned to the Office of the Registrar in Enrolment Services (HA120).

INSTRUCTIONS

Complete **one form for each semester** and, if possible, attach syllabi of the courses you wish to take in that semester at the host institution. Course selection and obtaining syllabi from your Host Institution is your responsibility. If you require assistance with this, please contact the International Office.

PROCESSING TIME:

Allow a minimum of four (4) weeks for the request to be considered. An official Letter of Permission and preliminary Program Progress Report (if applicable) will be emailed to your Concordia email account.

Complete all sections of this form in pen. INCOMPLETE FORMS WILL NOT BE ACCEPTED.

Surname:	First Name:	ID Number:
Program: ☐ 3-yr Bachelor of Arts ☐ 4-yr Bachelor of Arts ☐ 3-yr Bachelor of Science ☐ 4-yr Bachelor of Science ☐ Bachelor of Management ☐ Dual Degree - BMgt/BSc in Chem		Major/Concentration: _____ Minor/Emphasis: _____
*PLEASE PROVIDE INFORMATION ABOUT THE COURSES THAT YOU WISH TO TAKE, IF POSSIBLE.		
Name of Host Institution: _____		
Start Date (dd/mm/yyyy): ____/____/____ End Date (dd/mm/yyyy): ____/____/____		
Course Title	Course Code and Number	Course Credits

***A new OUSEP form must be submitted to the Office of the Registrar if there are any additions, deletions or changes to the course information listed above.**

Please submit syllabi with this form, if possible. You will receive a Letter of Permission and preliminary Program Progress Report (if applicable), with the final assessment being completed only when the courses are complete and an official transcript is received by the Office of the Registrar. **Syllabi should have the following information:**

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| <ul style="list-style-type: none"> ▪ Syllabi in a language other than English or French should be accompanied by a translation into English or French ▪ Institution ▪ Course code, title, and level ▪ Course instructor and qualifications | <ul style="list-style-type: none"> ▪ Course term and date ▪ Textbook and course materials ▪ Faculty and department for the course ▪ Number of hours of instruction (per week and total for the course) ▪ Academic calendar description ▪ Learning outcomes and objectives | <ul style="list-style-type: none"> ▪ Pre/co-requisites ▪ Grading system incl. final exam weight ▪ Group and individual projects identified ▪ Schedule of lecture and topics (incl. laboratories if applicable) |
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How would you like to be notified of the decision?

- ☐ Pick-up at Enrolment Services
- ☐ Emailed to my Concordia Student Email
- ☐ Mailed to my current address

I UNDERSTAND THAT MY REQUEST IS SUBJECT TO THE FOLLOWING CONDITIONS:

1. I understand and agree to the conditions and procedures laid out in this request.
2. Upon my return, I am responsible for submitting an official transcript to the Office of the Registrar.
3. If I plan to graduate in the current academic year, I must submit official transcripts to the Office of the Registrar according to the deadlines listed in the Academic Calendar (section 9.7.2) or I may not be eligible for graduation.
4. I am responsible for Concordia's degree requirements, deadlines, and policies as outlined in the Academic Calendar.

Student's Signature: _____ Date: _____