

UNIVERSITY OF CONNECTICUT

International Studies Minor Plan of Study

After completing this plan of study form, make an appointment to review it with the International Studies Undergraduate Advisor, Chris Brown (christopher.m.2.brown@uconn.edu). **The final plan must be signed by the advisor and deposited in the Registrar's office no later than the 4th week of classes of the semester in which you expect to graduate.** Once filed with the Registrar, the plan may be changed only with the consent of the advisor.

Name of Student: _____ **ID Number :** _____
(Please print)

Local Address: _____
_____ **Phone no.** _____

E-mail Address: _____

Fulfilling the requirements of the _____ catalogue. Major: _____

Expected date of graduation: _____

Courses: (Minimum of 15 credits of upper division courses)

Course Number and Title (Place an asterisk next to the courses that overlap with your major.) **Credits**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Credits: _____

Tools and Experience (Indicate which option you have chosen):

Advanced Intermediate Knowledge of a Modern Language other than English:

Demonstrated via: _____ Course Work _____ Examination _____ Other

Course Numbers and Titles: _____

Date of Examination: _____

Other (explain): _____

Study Abroad (at least six weeks duration):

Program and Country: _____

Dates of Attendance: _____

International Internship (at least six weeks duration):

Company or Organization: _____

Dates of Internship: _____

Plan Approved by: Elizabeth Mahan _____

International Studies Faculty Advisor

(IS Faculty Advisor's Signature)

(Student's Signature)

Date: _____