



**MIAMI DADE COLLEGE
OFFICE OF INTERNATIONAL EDUCATION
APPROVAL OF CREDITS**

Name: _____

Country/City: _____ Overseas university: _____

Term: _____ SS#: _____ Major: _____

Phone Number: _____ E-mail Address: _____

Students should not write below this line

To the Academic Dean, Department Chair or Program Director:

The student above indicated a desire to enroll in a Study Abroad Program recognized by the Office of International Education at Miami Dade College. The student wishes to obtain MDC credit by enrolling under the course number offered by your Department, or by way of transfer credit. The corresponding course and title at the overseas institution are listed under the heading overseas course. Information on the overseas course is attached to this form. If additional information is needed, please let us know and we will try to obtain the information for you.

Please indicate whether the overseas course is **Approved for MDC Credit** by checking the appropriate box.

Please indicate whether there is an **Equivalent MDC Course** to the overseas course. If so, please provide the course prefix and number of credit hours.

Your signature at the bottom of this form approves the course for MDC credit and establishes any course equivalency.

If you have any questions, please call Magnolia Hernández at 7-3008. Completed forms should be sent to the Office of International Education, Wolfson Campus, Building 1, room 1450.

Overseas Course	Approved for MDC Credit (Y/N)	Equivalent MDC Course (Y/N)	If equivalent, MDC course Prefix and Number	Credit Hours	Chair Signature

Comments? _____

Academic Dean Signature: _____ Date: _____