SIMMONS COLLEGE
Office of the Registrar
300 The Fenway, Boston, MA 02115
Tel 617.521.2111 Fax 617.521.3144

PETITION TO STUDY ABROAD

Student Name: _____ Simmons ID #: _____
Student telephone number during Study Abroad: _____
Program name: _____ University: _____
City: _____ Country: _____
Program email and telephone number: _____
Semester start date: _____ Semester end date: _____

If you are requesting that a course fulfill a Mode of Inquiry, please indicate the Mode number next to the course title and attach a course description. If you are requesting that a course fulfill a requirement for your major, minor, or your language proficiency, ask the department chair to send approval to degreeaudit@simmons.edu.

Titles of possible courses	Credits	Mode #
Total credits	_____	

- If you wish to inquire about transfer credit for additional courses through your Study Abroad program, please contact transfercredit@simmons.edu.
- Simmons College can grant you up to the maximum number of credits awarded by an American program or one credit for every ten contact hours at an international program. The number of credits awarded is at the discretion of Simmons College.
- Credit for courses will only be transferred in after receipt of your official transcript in the Office of the Registrar. After you have completed your studies, please request that an official transcript be sent to Office of the Registrar, Simmons College, 300 The Fenway, Boston MA 02115.
- All communications while you are abroad will be sent to your Simmons email address.
- Your emergency contact information must be up-to-date at http://aarc.simmons.edu.

Student's Signature: _____
Adviser approval: _____
Study Abroad Office approval: _____
The Office of the Registrar approves the courses listed above for general transfer credit (and modes if requested) with the following exceptions: _____
Office of the Registrar approval: _____
Questions during your Study Abroad should be sent to registrar@simmons.edu.