

Academic Reference for a King's Exchange

The student must complete Section 1 of the form and leave it with an Academic Counsellor at the Academic Dean's Office at King's (DL104). The counsellor will complete Section 2.

Section 1

Student name:

Student number:

Currently in: Year 1 2 3 4

Email:

Proposed Exchange term (give dates, as in *Sept 2014-April 2015*):

Proposed Host Institutions:

1.

3.

2.

4.

I authorize my Academic Counsellor to provide the information requested in **Section 2**. I am aware that taking courses on Exchange will affect the completion of my program, and my eligibility to graduate.

Student's signature:

Date:

Section 2

The Academic Counsellor will return this form to: Dr. Linda Weber, Manager, International Student Services and Exchange Programs.

1. Comments on the student's eligibility for the proposed Exchange program:

2. The student has achieved the 70% average: **Yes** **No**

3. Additional comments or recommendations:

Academic counsellor's signature:

Name:

Date: