

## **End of Semester Learning Agreement**

Name: Kent State ID#:		Host University: Term:		
<ul><li>Your profe</li><li>Have your</li></ul>	mes of the courses you are taking ssor <u>MUST</u> sign to confirm your a International Office Advisor/Exch enrollment status	ttendanc	e in that course	
contact your Acad isted on this docuremoval of funds. Form if you are not	d below do not match your Trans emic Advisor and the appropriate ment but not on your TCP. Failure This form is due to within the las t using any financial aid or scholar the processing of your documents sent to the 'Contact Us' form on the O	e departm e to have et <b>30 days</b> rships. One Stop, w	nent(s) to acquire transfer a a matching TCP can result in of the semester. You do not	pproval for the course(s) In a financial aid hold or ot need to complete this
Course Number	Course Title	Credit Hours	Method of Instruction (Online/In-Person/Hybrid)	Professor's/Instructor's Signature
		Hours	(Offiline/III-Person/Hybrid)	Signature
I, the Host Coord the term.	inator, can confirm the student's	attendan	ce in the courses listed abo	ve through the end of
Host Coordinator/International Office Staff Name			Host Coordinator Signature	_
Host Coordinator Email			Host Coordinator Phone	 Date