Outgoing Undergraduate Student Exchange Permission Form (OUSEP)



Once your exchange has been approved by the International Officienth must be completed and returned to th

Surname:	First Name:	ID Number:
Program:		Major/Concentration:
□ 3-yr Bachelor of Arts		
□ 3-yr Bachelor ofScience		Minor/Emphasis:
O Company	□ Dual Degree BMgt/BSc in Chem	·
*PLEASE PROVIDE INFORMATIO N ABOUT THE COURSES THAT YOU WISH TO TAKE, IF POSSIBLE.		
Name of Host Institution:		
Start Date (dd/mm/yyyy):	/ End Date (dd/mm/yyyy):/

Course Title