Pre-Departure Course Authorization Form

STUDENT EXCHANGE PROGRAM

International Centre, University of Toronto Mississauga
3359 Mississauga Rd. William G. Davis Building, Room 3093A, Mississauga, Ontario L5L 1C6

Student Name: ______________________________________
Student No: ________________

Before the application is considered complete, the courses you intend to take must be evaluated and equivalencies at the University of Toronto established. Please ask the appropriate Program Supervisor to assess your courses and complete this section of the form.

Please use a separate form for each area of study.

Attach course outlines or submit the calendar from the Host University

<table>
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<tr>
<th>COURSE AT HOST UNIVERSITY</th>
<th>CREDIT</th>
<th>UTM EQUIVALENT</th>
<th>EXCLUSION</th>
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Program Supervisor Signature:___________________________________________ Date: _________________

INFORMATION REGARDING ASSESSMENT OF TRANSFER CREDITS

If the course matches exactly, assign a specific transfer credit e.g. BIO152H5
If the course is similar but does not match exactly, assign an unspecified transfer credit e.g. BIO1**H5, exclusion: BIO152H5
If the course is not similar but should still be given credit, assign a generic transfer credit e.g. SCI1**H5
No credit to be given if the cases above are not appropriate.

You may use St. George or UTSC course codes if UofT Mississauga does not have an equivalent course.

NOTES