

International Plan International Experiences Declaration Form

INSTRUCTIONS: This form is for students planning to complete a **recommended set of international experiences** for the International Plan. To ensure that your chosen international experiences count toward IP requirements, you are **required** to complete this form. You are strongly encouraged to complete this process **before applying for your first IP international experience.**

If you would like to seek approval for a combination of international experiences that are not on the IP Recommended International Experiences list for your major, you should complete the International Experience Approval Form: https://oie.gatech.edu/sites/default/files/new_international_experience_approval_form.docx.

NOTE: You must still meet all eligibility requirements and application deadlines of your chosen programs, and you are strongly encouraged to speak with your academic advisor(s) about your plans.

Name _____ Major _____

GT ID _____ Current Cumulative GPA _____

*Language to be used for IP _____ **Pursuing "Language Proficiency" designation? Yes No

1st IP international experience: _____

Country _____ Anticipated term to be completed _____

2nd IP international experience: _____

Country _____ Anticipated term to be completed _____

Student Signature _____ **Date** _____

1) All students must first meet with the IP Advisor in OIE to discuss their plans. Please make an appointment by emailing internationalplan@oie.gatech.edu or calling 404-894.7475. After all other necessary signatures have been gained, return form to OIE (211 Savant).

Signature _____ **Date** _____

2) All students need to meet with the advisor(s) for the programs you plan to pursue. This will be the Exchange Advisor for your particular program(s), the Global Internship Advisor, and/or the Education Abroad Advisor over general advising (211 Savant Bldg, 404-894-7475): <https://oie.gatech.edu/about-us>.

OIE Rep. #1 _____ Signature 1 _____ Date _____

OIE Rep. #2 _____ Signature 2 _____ Date _____

3) All students need to meet with the [IP Faculty Representative](#) for their major.

Signature _____ **Date** _____

RETURN FULLY COMPLETED FORM TO OIE (211 SAVANT).