**Dear Student:**

You have been accepted to participate in the study abroad course ***(Course Name and Number)*** during (XX Semester). This course includes a mandatory international travel component to (COUNTRY) during (DATES).

If the travel dates overlap with another academic class this semester, you should consider rearranging your schedule to avoid the conflict. If you do not have flexibility and are required to register for a course that may overlap with the travel dates above, you must get the professors’ signature of approval to confirm that they are able to accommodate the situation. This must be done before the UC Office of the Registrar Drop/Add deadline. If you cannot receive approval from the professor, you will need to drop either class.

**Dear Professor:**

This letter is to confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has been accepted to participate in the study abroad course mentioned above

The travel dates for this course will overlap with one or more of your class dates. In order to participate in my course, I am requiring the student to inform their professors of any conflicts and have the professor’s signed approval for their absences. Please sign below confirming that you are aware that this student will be out of town during (DATES) as a part of their study abroad program and you and the students are able to arrange any necessary accommodations ahead of time for conflicting classes.

I apologize for the overlap with your course but sincerely hope that accommodations can be made for your student to participate in this unique learning experience. Please contact me with any questions.

Sincerely,

(NAME, TITLE, CONTACT DETAILS, SIGNATURE)

*Please sign to confirm that you are aware that this student will be out of town as a part of their study abroad program and you and the students are able to arrange any necessary accommodations ahead of time for your course.*

Professor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Course Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Professor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_