

Name		Off-Campus Program	Off-Campus Program					
Hope ID		Semester			_			
Date	Major(s)	Semester		Minor(s	s)			
Write the off-campus progra	m course title and semest your Degree Works if you'	er credit hours in the first two color re unsure of the name of the requ	umns. In th		-		,,	
approval. If you're pursuing	an education major, you a	eed to be approved by the appropulso need approval from Dr. Sarallyed. The Registrar signs for any A	Hoeve in t	he Educa	ation Dep	artment. T	he Registrar's Office is	
	Credits		Major	Minor	Anchor Plan	Elective	Chair/Registrar Signature	
† Recommended				_				
	Advisor Signature	Date						
† Approved				_				
† Denied	Registrar Signature	Date						
Education majors only: † Approved								
† Denied		Date		_				