The University of Oklahoma

Reciprocal Exchange Students
Mid-Term Progress Report Form for Fall Semester 2014

As a condition of maintaining legal status in the U.S., federal regulations require international students participating in reciprocal exchange programs to engage “full time in a prescribed course of study” and to maintain “satisfactory advancement towards the completion of his or her academic program” (22 C.F.R. § 62.23(h)(2)(i)). In order to comply with these regulations, an exchange student must be registered in a full-time credit load, be regularly attending and participating in classes, and be making a good faith effort to progress academically in his/her program.

Reciprocal exchange students are required to request each of their instructors complete this form at mid-term each semester. Students must return completed forms to the Office of Education Abroad, Hester Hall, 729 Elm Avenue, Room 144, Norman, Oklahoma 73019. All forms must be completed and properly submitted by October 17, 2014.

Student’s Printed Name: ________________________________  OU ID Number: __________

The information requested below must be provided by the above-named student’s instructor.

The above-named student:

☐ has been regularly attending and participating in class.
☐ has been making a good faith effort to make academic progress.

Comments (optional):

________________________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________________________

Course Title/Department: ___________________________________________

Instructor’s Printed Name: ________________________________  Course Number: __________

Instructor’s Signature: ________________________________  Date: ________________

By signing below, I, the above-named student, certify that I have presented this form to the above-named instructor and that the above-named instructor has provided the information set forth in this form.

Student’s Signature: ________________________________  Date: ________________