**VERIFICATION OF ENROLLMENT ABROAD FORM (VEA)**

*Fax to OIE: 001-404-894-9682, or scan & email, or email a photo of completed form*

To be completed by student upon arrival in host country and returned **within 2 weeks**

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**FULL NAME:** __________________________________________________________

**GT ID:** ___________________________ **GT E-MAIL:** ____________________________

**DO YOU RECEIVE HOPE OR ZELL?** □ YES □ NO

**PLEASE LOG INTO YOUR ATLAS ACCOUNT AND FILL OUT YOUR OVERSEAS CONTACT INFORMATION QUESTIONNAIRE AS SOON AS POSSIBLE.**

To be signed and completed by either the registrar of the foreign institution or a staff member of the international office at the host institution. This form is valid only when signed.

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This is to verify that ____________________________ has enrolled for ____________________________

(NAME OF STUDENT) (TOTAL # OF HOST CREDITS)

AT ____________________________ FOR ____________________________

(NAME OF INSTITUTION) (SEMESTER OR TERM)

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The classes in which this student has enrolled are as follows:

<table>
<thead>
<tr>
<th>Host Name of Class and Course #</th>
<th># of Credits at Host Inst.</th>
<th># of GT Equivalent Credits</th>
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**Total attempted hours:** ____________________________

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**Host Institution** Georgia Tech

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**SIGNATURE OF REGISTRAR OR OVERSEAS PROGRAM ADVISOR**

**DATE (MONTH /DAY /YEAR)**

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**NAME – PLEASE PRINT**

**TITLE**