

# Confirmation Form

Minnesota Semester

Please confirm your participation in the Minnesota Semester program by completing and returning this form. You **will not be issued an I-20** for your student visa until this form is completed.

Participant Name \_\_\_\_\_

Term:             Fall of Year: \_\_\_\_\_             Spring of Year: \_\_\_\_\_

This confirms that I plan to attend the Minnesota Semester program for the term listed above. By signing below, I indicate my understanding of the following:

- I will initialize and use my University of Minnesota internet account and email. Note: Your University of Minnesota email is the official mode of communication for all exchange students.
- I have read, understand, and agree to comply with the course restrictions and requirements and regulations pertaining to the program in which I plan to participate.
- I will submit all required pre-departure materials and complete all pre-departure requirements communicated on relevant University of Minnesota websites and/or via email.

\_\_\_\_\_  
*Participant Signature*

\_\_\_\_\_  
*Date*

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gomn@umn.edu

**UNIVERSITY  
OF MINNESOTA**