**Course Selection Form Spring 2017**

**Find your courses in a Stockholm University course catalogue:**

[sisu.it.su.se/en/educations](http://sisu.it.su.se/en/educations)

|  |  |
| --- | --- |
| **Spring term 2017** **2017-01-16 – 2017-06-04**Period 1\*A - first half of the term: Monday 16/1Period 1\*B- first half of the term: Thursday 16/2 | **Spring term 2017****2017-01-16 – 2017-06-04**Period 2\*C - second half of the term: Tuesday 21/03Period 2\*D- second half of the term: Tuesday 2/05 |

|  |
| --- |
| **One semester** |
| Period 1\* | Period 2\* |
| A | B | C | D |
| 7.5 | 7.5 | 7.5 | 7.5 |
| 15 | 15 |
| 30 |

Deadline to upload this form as a pdf in the online application is:

**October 1, 2016 for spring semester 2017**

Name of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sending institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please select courses from maximum 2 different departments**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Department  | Course code | Course title | Credits (hp) | **Period 1\*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Department  | Course code | Course title | Credits (hp) | **Period 2\*** |
|  |  |  |  |  |
|  |  |  |  |  |

Student's signature and date:

|  |
| --- |
|  |

**SENDING INSTITUTION**

|  |
| --- |
| I confirm that the proposed course selection is approved:Coordinator:E-mail:Phone incl. country code: Coordinator's signature and date:  |