Exchange Student Course Evaluation Form York International

The student named below is participating in an official exchange between York University, Canada and an exchange partner institute. This form is intended to help the home university determine the assessment that the student will receive for the work presently completed in your course.

Please mail this	form to the	home institution of the student to the attention of the Exchange Coordinator.
Home Institution		
Exchange Coor	dinator	
STUDENT	INFORM	MATION
First Name		Last Name York Student #
COURSE II	NFORM	ATION
Course Instructor's Name		
Title of Course		
		Academic Year Term/Semester Course Number
Overall grade fo	or the cours	e:
Letter Grade		Numerical Grade
	Signatur	e
	Position	
	Departm	ent
	Date	

Privacy: Personal information in connection with this form is collected under the authority of The York University Act, 1965 and will be used for the purpose of administering participation in York International Exchanges and related purposes. If you have any **questions about the collection**, **use and disclosure** of this information by York University, please contact the Associate Director, York International, York University, 200 York Lanes, 416-736-5177.