



**STUDENT REPORT –MID PROGRAM**

Please complete this form, have it signed by your Host Institution Advisor, and submit it to IIE after you have received the final grades for your first academic term. To submit this form, upload it to your BSMP Grantee Portal profile, [https://mycusthelp.info/IIE/\\_cs/Login.aspx](https://mycusthelp.info/IIE/_cs/Login.aspx). You must select “Mid-term Report” as the document category in the Grantee Service Portal.

**NAME:** \_\_\_\_\_ **IIE ID:** \_\_\_\_\_

**FIELD OF STUDY:** \_\_\_\_\_

**NAME OF U.S. UNIVERSITY:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_

**ACADEMIC TERM (Check one):** Fall Winter Spring Year: \_\_\_\_\_

**(Check one):** QUARTER or SEMESTER or TRIMESTER

**SECTION A – FIRST ACADEMIC TERM**

Please list the courses you have registered to take for the \_\_\_\_\_ quarter/semester/trimester of 20\_\_\_\_ :  
(Fall/Winter/Spring)

Academic Department	Title of Course	Is this an undergraduate level course?	Number of Credits	Grade
<i>Example: Electrical Engineering</i>	<i>ECE1220: Electrical Circuits and Signals</i>	<i>Yes or No</i>	<i>4</i>	<i>A</i>
			<b>GPA*</b>	

\*If your GPA is lower than a 2.0, use the space below to explain the circumstances and why you were unable to meet the program’s minimum GPA requirement. If you require additional space, please attach a separate sheet.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you registered for an Independent Study with a faculty or professor on campus, please provide a brief description of your project. If you require additional space, please attach a separate sheet.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



SECTION B – SECOND ACADEMIC TERM

Please list the courses you have registered to take for the \_\_\_\_\_ quarter/semester/trimester of 20\_\_\_\_:
(Fall/Winter/Spring only)

Please note it is your responsibility to inform IIE if your course schedule for the academic semester changes.

\*\*\*\*\*None of your coursework should be online. No online courses will be covered by your scholarship.\*\*\*\*\*

Table with 4 columns: Academic Department, Title of Course, Is this an undergraduate level course?, Number of Credits. Includes an example row for Electrical Engineering and a Total Credits row.

Endorsement of Brazil Scientific Mobility Student:

By signing below, I hereby certify that the aforementioned information is true and correct and that I acknowledge/confirm the following:

- I understand that as a J-1 visa holder I must be registered as a full-time student during the academic portion of my authorized program. A full-time course load can be defined from 12 to 18 credits per semester. If I am considering taking more than 16 credits then I will need to receive approval from my Academic/International Student Advisor and IIE prior to the first day of classes of the respective term.
I understand that when registering for classes, it is my responsibility to check with my Academic and/or International Student Advisor to ensure that the course-load I am enrolled in consists of at least 75% of credits directly related to my field of study as outlined on the first page of this TOA. The remaining 25% or less of credits should be in academic-related coursework.
I understand that all of my coursework must be academic in nature and that non-academic coursework, including but not limited to physical education, music instruction, arts & crafts, will not be covered by my scholarship. I will be responsible for all non-academic coursework related fees if I do not comply with this policy.
I understand that none of my coursework should be online and that online courses will not be covered by my scholarship. I am responsible for all online coursework related fees if I do not comply with this policy.
I understand that it is not recommended I enroll in graduate-level coursework, unless other deemed appropriate and approved, as these classes may be more rigorous as well as laborious.
I understand that if I reduce the number of credits I am enrolled in after my U.S. host institution's published deadlines, even if I did not attend the course, that I may be held financially responsible for paying any tuition or fees pertaining to the credits dropped.
I understand that I must inform IIE immediately if I have any difficulty meeting academic requirements, remaining in good academic standing, or maintaining full-time status at any point during my authorized program.

Student's Signature

Date



INSTITUTE OF  
INTERNATIONAL  
EDUCATION



**Endorsement of Academic Advisor:**

*I have reviewed the above study plan for \_\_\_\_\_ (BSMP Student's Name) and hereby certify that the course-load this student is registered for is (i) defined as full-time status by my institution; (ii) is appropriate for the student's aptitude; (iii) consists of at least 75% of credits directly related to his/her field of study, with the remaining 25% or less of credits in academic-related coursework; and (iv) meets all institutional requirements and any other minimum academic requirements set forth by my institution and the BSMP program policies as outlined in the student's Terms of Appointment (TOA).*

\_\_\_\_\_  
Name and Title of Academic Advisor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone/Email