

Center for International Programs and Activities

Application to Study Abroad

Academic Year 20__ - 20__

Universitat Juame I, Castellón, Spain

Al Akhawayn University, Ifrane, Morocco

Ludwigsburg University of Education, Ludwigsburg, Germany

Instructions

1. Fill out the application form completely.
2. Ask two people you know well to fill out the recommendation forms. At least one must be a university professor.
3. Write a 500 word essay on why you want to participate in this program and a letter introducing yourself to your roommate or host family abroad.
4. Have your physician complete the enclosed report (**please note:** this applies only to those students whose application to study abroad has been approved by CIPA. This report must be submitted soon after receiving the approval notification from CIPA).
5. Read and sign the waiver form. No student will be allowed to participate in the program if this form is missing from their file.
6. Return by March 1st, of any given year, the completed and signed application, waiver, and recommendation forms to:

Rita Haider
Director, Center for International Programs and Activities
Shawnee State University
Rose L. and Augusta Jacobs building
740-351-3127
740-351-3153 (fax #)
rhaider@shawnee.edu

General Information:

1. In order to travel abroad, you must have a valid passport. If you do not have a passport, apply for one as soon as possible after notification of acceptance.
2. All students in the program are recommended to purchase the International Student I.D. card. This card is available at ISIC website, www.isic.org/. The ISIC card allows students discounts on airfare and much more. The card cost \$22 and requires proof of student status.
3. The cost of your study abroad will closely approximate your costs at Shawnee State University, plus travel expenses. The heaviest cost will be your international airfare. The CIPA office will assist you in finding the most reasonable airfare for your travel times. Any financial aid you are eligible for at SSU will apply towards the cost of your study abroad.

Universitat Jaume I (James I University) is in the city of Castellon de la Plana. The city is situated between the mountains and the sea, and adding to this natural beauty, it is also surrounded by orange groves. Castellon de la Plana is 65 KMs north of Valencia and 285 KMs south of Barcelona. Castellon de la Plana's newly refurbished port district provides a wealth of leisure activities owing to the new facilities and businesses attracted by the renovation. Castellon, the province within which Castellon de la Plana is located, sports many beautiful beaches along its 112 KMs of coastline, easily accessible from UJI. Add to this the wonderful people of Castellon, and there is no doubt this is a spectacular opportunity!

Al Akhawayn University is located in Ifrane, a small town located in the Middle Atlas Mountains, at an altitude of 1600 m or about 5000 feet. Ifrane is just 60 KMs away from Meknes, 80 KMs from Moulay Driss Zerhoun and the Roman ruins of Volubilis, 65 KMs from Fez, and 200 KMs from Rabat. Winters in Ifrane can be cold with significant snowfall, and summers are mild. Oak and cedar forests, the springs, streams, and lakes around Ifrane have made it a very popular resort for all seasons.

Ludwigsburg University of Education is located approximately 20KM north of Stuttgart, the capital of Baden-Wurttemberg. The University is located on northern outskirts of the town and shares a campus with two colleges. Ludwigsburg is said to be the cradle of Swabian poetry and in the past the kings of Wurttemberg resided here. The greatest and best preserved baroque palace in Germany is in Ludwigsburg. The campus can be easily reached from Stuttgart by the suburban train system(S-Bahn). There is a station directly on the campus.

**Center for International Programs and Activities
Study Aboard**

APPLICATION FORM

Personal Data

1. Name: _____
2. Date of Birth: Month ____ Day ____ Year ____
3. Student Identification Number _____
4. Permanent Address:
Street: _____
City: _____ State: ____ Zip Code: _____
Home Telephone: (____) ____ - ____ Cell: (____) ____ - ____
5. Your current e-mail address: _____
6. University Address (if different):
Street: _____
City: _____ State: ____ Zip Code: _____
Telephone: (____) ____ - ____
(check if same as #4 ____)
7. List a parent, guardian, spouse, or other individual who should be notified in case of an emergency:
Name: _____
Street: _____
City: _____ State: ____ Zip Code: _____
Telephone: (____) ____ - ____
8. Do you have any physical problems? Yes: ____ No: ____

If "yes" please explain: _____

9. Are you taking any medication? Yes: ____ No: ____

If "yes" please list: _____

10. Do you (or your family) have an insurance policy that covers you for accident or illness abroad? Yes: ____ No: ____

11. Are you a U.S. citizen? Yes: ____ No: ____

If "no" what is your citizenship? _____

12. What is your preference for term abroad?

____ Fall Semester

____ Spring Semester

____ Either Term

____ Both Terms

13. Do you have a passport? (CIRCLE) Yes No

14. Academic Data

1. High School attended and date of graduation: _____
2. GPA (University): _____
3. Major field: _____
4. Credit hours completed: _____
5. Anticipated date of graduation: _____
6. On the back of this page, list the language courses you have had at the high school and/or the college level. If you have never had a foreign language course, please check here. _____
7. If you have traveled outside the U.S., on the back of this page list the places and dates. If you have never traveled outside the U.S., please check here. _____
8. List two references. The recommendation forms are enclosed. Please have referees return forms to you in a sealed envelope and submit along with this application form.
 - A. Name: _____
Address: _____
Telephone Number: (____) ____ - _____
 - B. Name: _____
Address: _____
Telephone Number: (____) ____ - _____
9. How did you learn about this program? _____

Applicant's signature

X

Date: _____

Parent or Guardian's Signature (if under 18)

X

Date: _____

**Center for International Programs and Activities
Study Abroad**

STUDENT'S WAIVER FORM

Students are expected to abide by the Shawnee State University Code of Conduct as expressed in the Shawnee State University Catalog and the Student Handbook. Students should familiarize themselves with the rights and responsibilities outlined by the Board of Regents and all university rules and regulations.

The undersigned agrees that the Director of the Center for International Programs and Activities reserves the right to terminate the undersigned student's participation in the said program if the Director, after appropriate consultation, deems said student's acts or conduct detrimental to or incompatible with the best interests and welfare of the program. The undersigned student further agrees, upon such termination, to return home at the undersigned student's expense, and forfeiture of all fees or charges, which are not refundable.

Signature of Student _____ **Date** _____

Signature of Parent or Guardian _____

Date _____

**Center for International Programs and Activities
Study Abroad**

CONFIDENTIAL PHYSICIAN'S REPORT

_____ is making application
(Name)

for a Shawnee State University Study Abroad Program. In your opinion, is the student physically and emotionally fit for study abroad?

___ **Yes** ___ **No**

Please list any conditions which may require special attention and/or medication:

Any student taking drugs with him/her for medical purposes **MUST** have a doctor's prescription with him.

Physician's Name _____

Signature _____ **Date** _____

Address _____

Telephone Number (____) ____ - _____

Please return to student for inclusion with his/her application packet.

Center for International Programs and Activities
Study Abroad

Confidential Recommendation Form

To be completed by a person who is acquainted with the student's academic work and/or ability to meet cross-cultural challenges.

_____ is making application to study abroad. Please judge the applicant's environmental adaptability, emotional stability, and scholarly aptitude. Also, please comment on your opinion as to the student's likelihood to profit from studying abroad.

Signature _____ Date _____

Title _____ Dept. _____

Institution _____ Telephone (____) ____ - _____

Please return to the student in a sealed envelope for inclusion with his/her application packet.

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