

UNION UNIVERSITY

EXTERNAL STUDY PROGRAMS

Application Part 1

Institute for International and Intercultural Studies

General Information:

Name: _____ I.D. Number: _____

Cell Phone #: _____ Alternate Phone #: _____
(include area code)

UU Box Number: _____ Union Email Address: _____

Home Address: _____ City: _____

State: _____ Zip Code: _____ Home Phone #: _____

Academic Information:

Classification: SR JR SO FR Cumulative GPA at Union: _____
(Must have completed one full semester at Union before applying) (Minimum 2.50)

Anticipated Graduation Date: _____ Advisor(s): _____

Program Information:

Institute or University where you would like to study: _____

Subject(s) you would like to study: _____

Length of program ____ Semester ____ Year ____ Summer ____ Winter

Projected dates _____

Approval Signatures

I fully support this student's plans to study in an off-campus program.

Advisor's Signature

Dean of Students' Signature

Will you need to arrange for on campus housing after you return? _____

Attach an unofficial copy of your transcript.