

**APPLICATION FOR MLC STUDY ABROAD COURSES**  
 The College, University of Rochester  
**SUMMER PROGRAM**

I am applying to go to:

	<b>GRANADA, SPAIN/ QUITO, ECUADOR/OAXACA, MEXICO</b>
	<b>PADUA, ITALY</b>
	<b>BERLIN, GERMANY</b>
	<b>ST. PETERSBURG, RUSSIA</b>
	<b>RENNES, FRANCE</b>

PLEASE PRINT OR TYPE:

NAME \_\_\_\_\_  
 (Last) (First) (Middle)

MALE  FEMALE

BIRTH DATE \_\_\_\_\_  
 mm/dd/yyyy

STUDENT ID \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_  
 \_\_\_\_\_

MAILING ADDRESS (IF DIFFERENT FROM PERMANENT ADDRESS) \_\_\_\_\_  
 \_\_\_\_\_ UNTIL WHAT DATE? \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

TELEPHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

HOME SCHOOL (if you are not a UR student): \_\_\_\_\_

CAMPUS ADDRESS: \_\_\_\_\_

CAMPUS TEL.: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

U.S. CITIZEN? \_\_\_\_ If you are not a US citizen, which US visa do you presently hold?

CITIZENSHIP \_\_\_\_\_

(If you hold dual citizenship between the USA and another nation, please specify both countries of citizenship.)

CLASS STANDING WHEN PROGRAM BEGINS:

FIRST YEAR  SOPHOMORE  JUNIOR  SENIOR  SPECIAL / GRADUATE

CUMULATIVE GRADE POINT AVERAGE \_\_\_\_\_

CLASS YEAR \_\_\_\_\_ MAJOR(S) \_\_\_\_\_ MINOR(S) \_\_\_\_\_

HOW DID YOU BECOME INTERESTED IN THIS SUMMER STUDY ABROAD PROGRAM?

FORMER STUDENT     STUDY ABROAD OFFICE     BROCHURE     FRIEND      
POSTER     INTERNET     OTHER

1. What courses have you taken that might provide background to the courses in this program? Give course titles, dates taken, and a very brief description of the material covered.

2. Have you had any other experiences as background to this course? (e.g. personal, travel, independent foreign language study, other)

3. Please provide the name and address of a professor with whom you have studied who can recommend you for this program

4. What are your reasons for wanting to take this program? Please attach a separate sheet.

This information I have provided is true and complete.

SIGNATURE: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

- **Late applications will only be accepted if there is still available space in the program.**

## HOUSING INFORMATION

1. Do you smoke? yes no , and I do..  I do not mind a roommate/family who smokes.
2. What are your hobbies and interests?
3. If you will be living with a family, do you have objections to being around young children? dogs? cats? other pets?
4. Are there any dietary restrictions that a host family should be made aware of?
5. You are responsible for maintaining viable health insurance coverage during your time abroad. Please give the name of your insurance company, policy number and expiration date:

The answers I have given in this application are correct to the best of my knowledge.

---

STUDENT SIGNATURE

---

DATE

PLEASE RETURN THIS APPLICATION AND SUPPORTING MATERIALS TO:

SUMMER STUDY ABROAD  
MODERN LANGUAGES DEPARTMENT  
LATTIMORE HALL 403, RC BOX 270082  
UNIVERSITY OF ROCHESTER  
ROCHESTER, NY 14627

- UR students may submit an unofficial transcript or grade report and the name of recommending professor. Non-UR students must submit an official transcript and a letter of recommendation from a language professor.

**PLEASE SEE DIRECTOR OF PROGRAM FOR DUE DATE**