

SOUTHWESTERN UNIVERSITY
GRANADA, SPAIN ADVANCED SPANISH PROGRAM 2012
May 25 – July 7, 2012

Please print in ink or type

NAME _____ EMAIL ADDRESS _____
Last Name First Name M.I.

STUDENT ID # _____

DATE OF BIRTH _____ AGE _____ PLACE OF BIRTH _____

CITIZENSHIP _____ PASSPORT # _____

PHONE _____ SU BOX NUMBER *(if Southwestern student)* _____

MAILING ADDRESS (if different from SU box) _____

PERMANENT ADDRESS:

HOME PHONE (at permanent address)

Street

Area Code Number

CELL PHONE: _____

NAME OF PARENT(S) OR GUARDIAN(S) _____

CURRENT CLASS *(circle one)* FR SOPH JR SR OTHER ANTICIPATED GRAD. DATE _____

ARE YOU IN THE PAIDEIA PROGRAM? YES NO

MAJOR(S) _____

MINOR(S) _____ ADVISOR _____

FACULTY RECOMMENDATION *(List below the two faculty members who can provide a reference. No written recommendation needed.)*

Name _____

Email & Phone _____

Name

Email & Phone

PREVIOUS TRAVEL ABROAD

Please list below all previous travel and other experiences abroad. Please indicate dates of travel, length, location, and purpose (i.e., family vacation, high school exchange, etc.).

LANGUAGE LEVEL

The Spain Advanced Spanish Summer Program is designed for students who have reached 4th semester proficiency in Spanish. Please indicate which courses you have received credit. Also, indicate which courses you have tested out of, or received credit from another insitution.

_____ Spanish I
_____ Spanish II
_____ Spanish III
_____ Spanish IV

Please indicate additional college-level Spanish courses for which you have received credit.

PERSONAL STATEMENT

On a separate sheet of paper, please answer the following questions.

- 1. Other than advancing your language skills, what are your principal motivations and goals for participating in the Spain program?
- 2. What do you think might be challenging about living in Spain? What are some strategies you have for learning about and immersing yourself in the culture?

AUTHORIZATION FOR RELEASE OF TRANSCRIPT

Please sign below to authorize the Office of Intercultural Learning to request a copy of your transcript from the registrar. You do NOT need to request a transcript yourself.

Signature (DO NOT PRINT)

Date

AUTHORIZATION FOR RELEASE OF DISCIPLINARY RECORD

I hereby authorize the Dean of Students office to release the contents of my disciplinary record to the Granada, Spain selection committee. This information will be used only in the context of program selection, and will remain entirely confidential outside the selection process. I understand that this signed waiver is required in order for my application to be considered.

Signature (DO NOT PRINT)

Date

Please submit all application materials by February 3, 2012. For more information, email studyabroad@southwestern.edu, call 512-863-1857, or stop by the Office of Intercultural Learning in the Prothro Center, Room 231.

Application materials should be sent to:

Southwestern University
Office of Intercultural Learning
Prothro Center, Room 231
P.O. Box 770
Georgetown, TX 78627
p: 512-863-1857
f: 512-863-1535