

# A P P L I C A T I O N

## **SOUTHWESTERN UNIVERSITY & ACADEMIC PROGRAMS INTERNATIONAL** **COSTA RICA INTERMEDIATE SPANISH LANGUAGE PROGRAM 2012** **May 13 – July 7, 2012**

*Please Print in ink or type*

**NAME** \_\_\_\_\_ **EMAIL ADDRESS** \_\_\_\_\_  
*Last Name First Name M.I.*

**SOCIAL SECURITY NUMBER** \_\_\_\_\_

**DATE OF BIRTH** \_\_\_\_\_ **AGE** \_\_\_\_\_ **PLACE OF BIRTH** \_\_\_\_\_

**CITIZENSHIP** \_\_\_\_\_ **PASSPORT #** \_\_\_\_\_

**COLLEGE OR UNIVERSITY** \_\_\_\_\_

**CAMPUS ADDRESS** \_\_\_\_\_

**CAMPUS PHONE** \_\_\_\_\_ **SU BOX NUMBER** *(if Southwestern student)* \_\_\_\_\_

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**PERMANENT ADDRESS:**

**HOME PHONE (at permanent address)**

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*Area Code Number*

\_\_\_\_\_  
*City, State, Zip*

**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** \_\_\_\_\_

**COLLEGES ATTENDED:** List all colleges attended and degrees earned, if any

Name of Institution

Dates Attended

Degree(s)/Date

**FACULTY RECOMMENDATION** *(List below the one faculty member who will write a recommendation on your behalf)*

\_\_\_\_\_  
Name

\_\_\_\_\_  
College or University

**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 Costa Rica Intermediate Spanish Language and Culture Summer Program is designed for students who have the equivalent of 2 semesters of college-level Spanish. Please indicate what (if any) additional courses you have had at the college-level:

\_\_\_\_ Spanish I-II (all applicants must have the equivalent of 2 semesters of college-level Spanish prior to program)

Other courses:

**PERSONAL STATEMENT**

On a separate sheet of paper, please state your reasons for wanting to participate in one of the Southwestern Summer Study Abroad Programs. You should address why the program fits your academic and personal goals, what you hope to gain from the experience, and how you are prepared personally and academically to study abroad.

**AUTHORIZATION FOR RELEASE OF TRANSCRIPT**

Please sign below to authorize the Office of Intercultural Learning: International and Off-Campus Programs 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 Costa Rica 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. Please note that letters of recommendation must also be received by the deadline. For more information, email [studyabroad@southwestern.edu](mailto: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