



**Application for Summer Study Abroad Programs**

— 2010 Belfast Institute in Peace Building and Conflict Transformation (June 14-July 14, 2010)

Name: \_\_\_\_\_  
Last First M.I.

Email: \_\_\_\_\_

Banner I.D.: \_\_\_\_\_ Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Campus Mailbox: \_\_\_\_\_ Campus Extension: \_\_\_\_\_ Cell number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip

**Academic Information**

Current Class Standing: \_\_\_ Freshman \_\_\_ Sophomore \_\_\_ Junior \_\_\_ Senior

Major or Prospective Major (s): \_\_\_\_\_

**Passport Information and Emergency Contact**

Do you have a valid passport? \_\_ Yes \_\_ No. Passport Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
(If you do, please attach a color copy of the face page to this application)

**If not, it is highly recommended that you begin the passport process immediately.**

Emergency Contact: \_\_\_\_\_  
Name Relationship to the student

Address: \_\_\_\_\_  
Street City State Zip

Telephone number: \_\_\_\_\_

## Statement of Purpose

Write a brief statement (2 typed pages max.) describing why you would like to participate in this program. In particular, please discuss what you hope to gain from participating in this program and how it fits into your overall program of study at John Carroll University. Attach this statement to the application.

## Disciplinary Standing *(to be completed by the Dean of Students)*

Please list any infractions incurred by the applicant throughout his/her academic career. Please list any additional information or explanation you feel should be taken into consideration.

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Dean of Students

Signature

Date

## Release of Information

The information about you and the collection, retention and dissemination of your records are subject to federal regulation under the Family Education Rights and Privacy Act of 1974 (FERPA). It is therefore necessary for John Carroll University's Center for Global Education to obtain your permission to release information collected on this application and in your transcripts. We need your agreement to the following:

- I hereby release information contained in my application and transcripts to John Carroll University's Center for Global Education for review and approval for my study abroad application.

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Student Signature

Date

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Printed Name

Banner I.D. Number

## Disclaimer

I have read and understand my responsibilities pertaining to study abroad at John Carroll University. I am also aware that I will be required to purchase the International Student Identity Card (ISIC) at the Center for Global Education, AD. 126, if one is not provided by my chosen study abroad program. I understand that the purpose of this application is to ensure I stay within John Carroll University requirements for study abroad and by signing this form I have complied with all rules and regulations.

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Student (Please Print)

Signature

Date

Return application and deposit (checks should be made out to John Carroll University) to the Center for Global Education (AD 126)