University of Georgia Study Abroad Program Application

London Checklist

• Return completed application by Monday **November 9th, 2015 by 3:00 pm** to:
  
  Brocton Funke  
  224 Dawson Hall (The Dean’s Office)  
  305 Sanford Drive  
  Athens, Georgia 30602

• Submit all of the following materials together (except references, see below).
• Only completed applications will be considered.

**Make sure the following items are included in the materials you return:**

- All pages of the completed and signed application (including this one).
- 1 official copy of your UGA transcript  *(Obtain from the UGA Registrar's Office)*
- 1 unofficial transcript from any other college you've attended. *(use Oasis system to access this unofficial transcript, as it is not currently available on Athena)*
- 2 reference letters. *(It is the applicant's responsibility to secure references by the deadline. References may be included or forwarded by the referee.)*
- Application fee of $75.00 must be paid by check and given to Broc Funke in the Dean’s Office. *(This fee is refundable if you are not accepted into the program. Students who withdraw from the program may have this fee refunded until **March 4, 2016.** Furthermore, this fee is in addition to the program fee, and cannot be applied to the total.)*

I understand that submitting an application for a study abroad program does not guarantee acceptance into the program. Applicants must meet program requirements and be approved by the program's faculty coordinators. Participation is also subject to availability; some programs fill up early.

I further understand that the program or individual courses may be cancelled due to low enrollment or other factors and I understand that I will be informed of such a decision no later than 6 weeks before planned departure date or as soon as possible after any adverse circumstances that cause the program to be cancelled.

Student Name __________________________ Signature ______________ Date _____

**For Study Abroad Program Use Only:**

Date Received __________________________ Application Fee Received _________

Check Number __________________________ Missing Items ______________

Decision ________________________________ ______________
2016 London Study Abroad Program
University of Georgia Study Abroad
Program Application

Personal and Academic Information

Social Security Number ________________________________________________

Full Name __________________________________________________________

Preferred Name ______________________________________________________

Birth Date ___________________________ Age _________ Sex: _____ M _____ F

Mother/guardian’s Name _____________________________________________

Mother/guardian’s telephone number __________________________________

Father/guardian’s Name _____________________________________________

Father/guardian’s telephone number __________________________________

Are you on financial aid (including HOPE) ____Yes ____ No

What types? _________________________________________________________

Your college/univ. __________________________________________________

Are you a Georgia Resident? ____Yes ____ No

GPA _________ GPA in major _________

Major(s) __________________________________________________________________

Minor(s) __________________________________________________________________

Academic Level ____ 1st yr ____ 2nd yr ____ 3rd yr ____ 4th yr ____ Master’s ____ Ph.D.
(during study abroad)

Campus Address ______________________________________________________

________________________________ Phone ______________________________

E-mail _______________________________________________________________

Permanent Address __________________________________________________

________________________________ Phone ______________________________

Citizenship ________________ Passport Number __________________________

Date of Issuance ______________________ Date of Expiration ________________

Passport Agency __________________________________________________________________
Please list all colleges or universities previously attended:

Name ___________________________________________ Dates: From _______ to _______ Degree(s) awarded ____________________________ Major ____________________________

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Personal Activities

Are you currently employed? □ yes □ no Occupation ________________________________

If applicable, give name, address, and phone number of employer ________________________________________________________________

__________________________________________________________________________

List the primary co-curricular activities in which you are involved and in what capacity ________________________________

__________________________________________________________________________

__________________________________________________________________________

Disciplinary and Criminal Record

Are you currently, or have you ever been, charged with, or subject to, disciplinary action for scholastic or any other type of misconduct at any educational institution?

□ yes □ no If yes, please explain __________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Have you been convicted of a crime other than a minor traffic offense, or are any criminal charges now pending against you? □ yes □ no

If yes, please explain __________________________________________________________

__________________________________________________________________________

Convictions shall include: A finding of guilty by a judge or jury, a plea of guilty, or a plea of nolo contendere, irrespective of the pendency or availability of any appeal or application for collateral relief. If "Yes", explain fully, specifying the nature of the offense(s), the date(s) it/they occurred, the name and location of the court(s) and sentence(s) imposed. Please submit court documentation if appropriate.
Release and Application Signature

I hereby authorize officials at any educational institution that I have attended to release my disciplinary records (including but not limited to records maintained by the Judicial Programs and Services Office, the Registrar, the Department of Housing, and/or the Office of the Vice President for Academic Affairs) to the study abroad program director of the program to which I am applying. I fully understand that my disciplinary records may be a factor in evaluating my application.

I further acknowledge that the information provided on this application is true and accurate to the best of my knowledge. I fully understand that providing false information during the application process may be grounds for rejecting my application or grounds for dismissal from the study abroad program.

_________________________________________  __________________________
Student Signature                           Date

Applicants who are accepted to participate in a UGA study abroad program are required by the University of Georgia to complete and sign a student agreement and waiver which stipulates the terms and conditions of the program, student conduct regulations and a waiver of liability.

Signature of Study Abroad Advisor/Dean/Academic Advisor
(for non-UGA students only)

Name ___________________________ Title ___________________________ Date ______________ Phone ____
_________________________________________ E-mail ___________________________

Student has completed all the necessary steps to obtain permission to study abroad from our university.

___ Yes ___ No  Signature __________________________

Questionnaire

How did you first hear about this program?

☐ poster
☐ flyer or brochure - obtained where? ___________________________
☐ former participant
☐ Office of International Education
☐ campus presentation - location/presenter ___________________________

References

According to the Family Educational Rights and Privacy Act of 1974, you may decide whether letters of reference written on your behalf are to be kept confidential or available for your inspection. Please choose below and indicate your choice on the reference forms.

☐ Confidential file  ☐ Open file

Please obtain two references using the following forms and either include them in your file, or have them sent directly to the study abroad program office. References from faculty or employers are preferred. References from friends, family, or neighbors are not acceptable.
Reference Form For London Study Abroad Program

Please return by November 9, 2015 at 3:00 p.m. to:
Brocton Funke
224 Dawson Hall (The Dean’s Office)
305 Sanford Drive
Athens, Georgia 30602

I. This section is to be completed by the student applicant (please print or type):

Applicant’s Name__________________________________________________________

Applicant’s local telephone_________________________ E-mail__________________________

This reference is _____ confidential _______ not confidential

II. This section to be completed by the referee

Name and title of referee____________________________________________________________

Phone __________________ E-mail __________________

1. How long have you known the applicant and in what capacity? _________________
_______________________________________________________________________

2. Is there any reason why you would not recommend that the applicant participate in a study abroad program? ____________________________________________________________________________

Please indicate your perceptions of the applicant’s competence in the following areas:

<table>
<thead>
<tr>
<th>Area</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Outstanding</th>
<th>Inadequate Opportunity to Observe</th>
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</thead>
<tbody>
<tr>
<td>Intellectual Curiosity</td>
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Other remarks may be written or typed on the back of this form or on a separate sheet.

Signature of Referee__________________________ Date____________

Please notify the student when he/she may pick up reference or forward it to the address above.
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