

# Application for Study Abroad

## D-Term 2016

North Central College  
Office of International Programs

Please **print neatly in ink** and return completed application form to the Office of International Programs: Abe House, 48 E. Jefferson Ave.

### For Office Use Only:

Airfare Deposit: \$400.00 Date: \_\_\_\_\_ CC Chk # \_\_\_\_\_

Airfare Balance: \$ \_\_\_\_\_ Date: \_\_\_\_\_ CC Chk # \_\_\_\_\_

Program Fee Deposit: \$500.00 Date: \_\_\_\_\_ CC Chk # \_\_\_\_\_

### OPTIONS FOR D-TERM 2014 STUDY ABROAD PROGRAMS (SELECT ONE)

- ☐ China (GLS 260-D3) A Journey to the Great Wall
- ☐ France (GLS 160-D1) A Journey Through the History of France (Humanities)
- ☐ Germany (GLS 362- D1) Castles, Cathedrals, and Culture: A Tour Through Martin Luther's Germany (ACR)
- ☐ Greece/Italy- BUS (GLS 362- D2) Greece, Italy, and the European Union (ACR)
- ☐ Greece/Italy- THE (GLS 260- D5) Ancient Roman and Greek Drama
- ☐ Italy (GLS 362- D3) Art and Memory in Italy: Classical Antiquity to the Present (ACR)
- ☐ Japan (GLS 260- D4) Super Express: Japanese History, Society, and Culture
- ☐ London (GLS 260- D2) Pestilence, Plague, and the Fountain of Youth
- ☐ Morocco (GLS 260-D1) Transformation and Tradition
- ☐ Spain (GLS 160- D2) Discovering Historical and Cultural Treasures
- ☐ Ireland (MGT 690-D1) Graduate Study in Ireland (graduate students only)

### Personal Information

Name: \_\_\_\_\_  
(First) (Middle) (Last)

Date of Birth: \_\_\_\_\_ Check one: ☐ Male ☐ Female

Passport # (if you have one): \_\_\_\_\_ Passport Expiration Date: \_\_\_\_\_

***By April 29, 2016, please submit a color copy of your passport or proof that you have applied for a passport.  
Your passport must be valid through July 1, 2017.***

NCC ID #: \_\_\_\_\_ Campus Mailbox # (required for on-campus students): \_\_\_\_\_

Email Address: \_\_\_\_\_@noctrl.edu (Note: All study abroad emails will be sent to NCC accounts only.)

Current/Permanent Mailing Address:

\_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_  
(First) (Last)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

### Academic Information

Current year in school: ☐ Graduate ☐ Senior ☐ Junior (3<sup>rd</sup> year) ☐ Sophomore ☐ Freshman

Major(s): \_\_\_\_\_

Minor(s): \_\_\_\_\_

Academic Advisor's Name: \_\_\_\_\_ Department: \_\_\_\_\_

GPA: \_\_\_\_\_ Anticipated Graduation Date: \_\_\_\_\_  
(Month/Year)

Are you a transfer student? ☐ Yes ☐ No

Are you a College Scholar (NCC Honors Program)? ☐ Yes ☐ No

Are you receiving veteran benefits to fund your NCC education? ☐ Yes ☐ No

Have you previously participated in a D-Term course abroad or study abroad program at NCC? ☐ Yes ☐ No

If yes, when and where? \_\_\_\_\_

### Certification (Read the following before you sign.)

- I hereby certify that, to the best of my knowledge, the information furnished in this application is true and complete. I understand that if found to be otherwise, it is sufficient cause for refusal or dismissal.
- I understand that I am required to abide by College policies as outlined in the North Central College Student Handbook and by the rules listed on the course syllabus. If, in the judgment of a faculty member leading the course, I have violated the course rules or College policy as stated in the Student Handbook, I may be sent home at my own expense. In such circumstances, my parents may also be notified and additional disciplinary action may be taken by the College upon my return to the United States.
- I authorize the Office of International Programs (OIP) to register me for the above listed course once I have made my initial deposit.
- Once enrolled in the course, I agree to allow the OIP to distribute my name, address, and telephone number to other participants prior to departure. I also agree to allow my name and photo to be used for advertising purposes at North Central College.
- I agree to assume financial responsibility for the program fees and airfare as outlined for my particular course and for my personal expenses while abroad.
- I understand the payment schedule for the airfare and program fees.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_