



East Georgia State College Study Abroad Program Student Application

Checklist

Instructions:

- Return completed application to Dr. Carmine Palumbo, Director of Study Abroad (cpalumbo@ega.edu).
- Submit all the following materials together (except references which may be submitted separately, see below).

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

- All pages of the completed and signed application (including this one).
- 2 reference forms or letters. (It is the applicant's responsibility to secure references by the deadline. References may be included or forwarded by the referee.)

I understand that submitting an application for a study abroad program does not guarantee acceptance into the program. Candidates must meet program requirements and be approved by the program's director. 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. I also understand that exchange rate fluctuation and/or inflationary conditions may necessitate that the program raise fees above previously advertised rates between the time of admission and the beginning of the program. I understand that if I am accepted into this program, I will pay East Georgia State College tuition for the hours taken, the mandatory technology and institutional fees for the term, and any additional applicable fees. I also understand that in the event my study abroad program fee balance is not paid in full by the established due date or if I elect to withdraw from the program, refund availability and amount will be at the discretion of the program director and will follow program guidelines.

Additionally, I must abide by the withdrawal deadlines for coursework posted on the EGSC Academic Calendar.
****Note**** These deadlines are different than the program withdrawal deadlines.

Student Name: _____ EGSC ID # _____

Signature: _____ Date: _____



East Georgia State College Study Abroad Program Application

Personal and Academic Information:

Social Security Number: _____ DOB: _____

Last Name: _____ First Name: _____ M.I.: _____

Preferred Name: _____ Sex: M F

E-mail Address: _____ Tel. #: _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Have you ever traveled abroad? Yes No

Do you have a current passport? Yes No Passport Number: _____

Date of Issuance: _____ Passport Agency: _____ Date of Expiration: _____

Are you a Georgia Resident? Yes No

If not, in what state do you currently reside? _____

Mother/guardian's Name: _____ Tel. #: _____

Father/guardian's Name: _____ Tel. #: _____

Emergency Contact Info:

Contact Name #1: _____ Tel. #: _____

Address: _____

Contact Name #2: _____ Tel. #: _____

Address: _____

Financial Aid Info:

Are you on financial aid (including HOPE)? Yes No
Pell Federal Loan HOPE Other

Academic Info:

Are you an East Georgia College student? Yes No
If no, what is your home college/university? _____

GPA _____ GPA in major _____

Major (s) _____

Minor (s) _____

Academic Level 1st year 2nd year 3rd year 4th year Master's/Ph. D



East Georgia State College Study Abroad Program Application

Address of Home Institution: _____

City: _____ State: _____ Zip Code: _____ Tel. #: _____

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:

1. Are you currently, or have you ever been, charged with, or subject to, disciplinary action including suspension or expulsion for scholastic or any other type of misconduct at any high school, college, or university? Yes No
2. Have you ever been charged with, convicted of, or pled guilty or nolo contendere to a crime other than a minor traffic offense, or are any criminal charges now pending against you?
Yes No

If your answer to the preceding is yes, you **must** submit a Criminal Background Investigation with this application. The Criminal Background Investigation must be completed by a law enforcement agency and provided to the institution in a sealed envelope. Additionally, the EGSC Criminal Background Consent form must accompany the background investigation when presented for review by the CBI Committee. The consent form may be picked up in Enrollment Services.

Convictions shall include: A finding of guilty by a judge or jury, a plea of guilty, a plea of nolo contendere, a plea of no contest, an Alford plea to a criminal charge or a plea under the first offender act, 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.



Course Selections for the Study Abroad Program:

*Please note that any course (s) is subject to being cancelled due to low enrollment. Additionally, in order to study abroad students must be registered for a course.

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 Office of Judicial Programs, the Registrar, the Department of University Housing, and/or the Office of the Vice President for Instruction) to the study abroad program director and/or study abroad committee of the program to which I am applying as needed. 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 an EGSC study abroad program are required by the institution 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-EGC 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: _____

FERPA Information:

_____ (Initial) I understand that if I choose to allow my parent(s) to gain access to any part of my Academic or financial records, I must complete a FERPA release form. This form can be found on the Office of the Registrar webpage. www.ega.edu/registrar/

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. References from friends, family, or neighbors are not acceptable.



Reference Form For East Georgia State College Study Abroad Programs

Please return to: Dr. Carmine Palumbo

Fax: (478) 289- 2114

Deliver to: Humanities Suite, lower level of the Academic Building (Swainsboro Campus)

I. This section 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:

Area	Below Average	Average	Above Average	Outstanding	Inadequate	Opportunity To Observe
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stress Tolerance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ability to interact with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self-motivation/ Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Other remarks may be written or typed on the back of this form or on a separate sheet.

Signature of Referee:

Date:

Please **do not** return to the student; forward reference to the address or fax number above.



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Ability to interact with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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