

**Macon State College**  
**Application for Summer Study Abroad Program**

Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ MSC E-mail: \_\_\_\_\_

Major: \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Have you traveled abroad before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what was the purpose of the trip? \_\_\_\_\_ Study \_\_\_\_\_ Vacation

How long was your stay abroad? \_\_\_\_\_

Is there any reason or concern that might prevent you from fully enjoying a study abroad experience? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain on the back of this sheet.

**Location of Study Abroad Program:** \_\_\_\_\_

**A.M. Course Selection 1<sup>st</sup> choice:** \_\_\_\_\_

MSC Course Equivalent (if any): \_\_\_\_\_

**A.M. Course Selection Alternate:** \_\_\_\_\_

MSC Course Equivalent (if any): \_\_\_\_\_

**P.M. Course Selection 1<sup>st</sup> choice:** \_\_\_\_\_

MSC Course Equivalent (if any): \_\_\_\_\_

**P.M. Course Selection (Alternate):** \_\_\_\_\_

MSC Course Equivalent (if any): \_\_\_\_\_

**I understand that submitting an application to Macon State College for the Summer Study Abroad Program does not guarantee acceptance into the program, that candidates must meet program requirements, and that participation is subject to availability. I also understand that submission of my signed application allows coordinators of the Study Abroad Program at Macon State College to review my application and my records on file at the institution. If my application for Study Abroad is approved, I further understand that I am responsible for abiding by the Macon State College Code of Conduct while I am participating in a Study Abroad Program.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_