



Spanish Language, Literature & Culture

in Xalapa, Mexico

WAYNE STATE UNIVERSITY

Study Abroad & Global Programs

5155 Gullen Mall • 1600 UGL • Detroit, MI 48202 • Phone: (313) 577-3207 • Fax: (313) 577-7687

SEMESTER _____

YEAR _____

SPA 5990 (1 credit)

1-4 Spanish Courses

Enrollment in this course is required.

Selected from registration form after admission into the program

PROGRAM APPLICATION

To apply to this program, please fill out this application, attach an unofficial transcript and submit it with a \$25 application fee made payable to Wayne State University.

Applicant Information:

Mr. Preferred First Name/Nickname Last Name Full Legal Name (as on passport)
 Ms.

Current Address

City State/Province Postal Code E-mail *Most correspondence from our office will be via e-mail. Please list one you check regularly.

Phone Alt. Phone Country of Citizenship **

****Please note:** If you are not a US Citizen, it is your responsibility to obtain a visa to enter the country you will be visiting. Not all programs require a visa so check online or with an advisor if you are uncertain.

Are you currently a WSU student? <input type="radio"/> Yes, my WSU PID # is: _____ <input type="radio"/> No, I have never attended the university. <input type="radio"/> No, my last class was in _____ (MM/YYYY). <input type="radio"/> No, my current institution is: _____		Status during program: <input type="radio"/> Freshman <input type="radio"/> Post Bachelor <input type="radio"/> Sophomore <input type="radio"/> Masters <input type="radio"/> Junior <input type="radio"/> Doctoral <input type="radio"/> Senior <input type="radio"/> Other Professional		Current GPA: _____ Are you in the Honors Program? Y N Are you a DCE Student? Y N	
Race/Ethnicity <small>*For statistical purposes only; does not affect program eligibility. If you are multi-racial, please choose the one you identify with most.</small> <input type="radio"/> Hispanic <input type="radio"/> Asian or Pacific Islander (API) <input type="radio"/> White (Non-Hispanic) <input type="radio"/> American Indian, Eskimo or Aleut(AIEA) <input type="radio"/> Black (Non-Hispanic)		Date of Birth (MM/DD/YYYY)		Gender M F	

Emergency Contact: Please list who should be notified in case of emergency

Name Relationship to you

Current Address

City State/Province Postal Code

Home Phone Work Phone Cell Phone Fax (optional)

E-mail

References: Please list the names, telephone numbers, and e-mail addresses of two references who may be contacted regarding your application

Name	Phone	E-mail
Name	Phone	E-mail

Xalapa

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Mexico

How did you learn about this study abroad program?

- Faculty Member Study Abroad Office Class Study Abroad Fair
 Former Participant Other _____

Have you traveled abroad for longer than a week? Y N If yes, where? _____

Please describe your experience. _____

Payment, Deposit and Refund Policies

Program Fee: \$1,785 - 4,500 (depending on summer program or a full semester) in Xalapa, Mexico

Program Deposit: Within two weeks of acceptance, you will be required to submit a \$150 non-refundable program fee to The Office of Study Abroad and Global Programs to secure your place. The remainder of your room and board, program fee and tuition will be assessed to your student account and you will pay the University's Cashier Office according to the published schedule.

Withdrawal Policies: Participants who wish to cancel must do so in writing by mail or e-mail. Notification should be sent to:

Margaret Ogg
 The Office of Study Abroad and Global Programs
 5155 Gullen Mall
 1600 Undergraduate Library
 Detroit, MI 48202
 studyabroad@wayne.edu

Refund Policy: The \$150 program fee, payable upon acceptance, is non-refundable.

I have read and understand the Payment, Deposit and Refund Policies as listed above. I understand I will be notified of my acceptance by an official letter sent from the Office of Study Abroad and Global Programs that will be mailed to the current address I provided. I also understand my acceptance letter will include a Decision Form that I must return within two weeks from the date of my acceptance letter or I will be withdrawn from the program, and agree to adhere to the parameters of the program as outlined by the Office of Study Abroad and Global Programs. I understand that in order to secure my place in the program, a \$150 non-refundable deposit is due within 14 days of being accepted into the program.

Signature _____

Date _____

Parent/Guardian Signature : _____
 (if applicant is under age 18)

Release of Student Information

During the course of a student's participation in a study abroad program, the Office of Study Abroad and Global Programs may wish to provide relevant information from the student's educational records to the student's parents or other third parties. Depending on circumstances, information to be released might include student account information, information about the program in which the student is enrolled, or non-emergency information related to the student health or safety.

Please sign below to indicate that you have read this form and authorize the Office of Study Abroad and Global Programs to provide relevant information from your educational records to your parents and any relevant third parties:

Signature _____

Date _____

Parent/Guardian Signature : _____
(if this section is not signed, no student information other than "directory information" will be released to family members, etc. except in an emergency)

For Office Use Only

Date Received:

Special Endorsements:

- Non-Matriculation Form
 International Undergrad Admission Application
 Undergrad Admission Application for Canadians
 Auditing Course

Date Entered:

Entered By: