

# Study Abroad Application



To apply to this program, please fill out this application, attach an unofficial transcript and submit it with a \$25 application fee to:

## University of Salford Undergraduate Exchange Program in Urban Affairs

Salford, England

Fall & Winter Semester

## Study Abroad and Global Programs

5155 Gullen Mall  
1600 David Adamany Undergraduate Library  
Detroit, MI 48202  
(313) 577-3207  
E-mail: [studyabroad@wayne.edu](mailto:studyabroad@wayne.edu)  
Website: [www.studyabroad.wayne.edu](http://www.studyabroad.wayne.edu)

### Applicant information Please type, write clearly or fill out this form online and print the completed application.

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

Current Address

City State ZIP Code

Phone Alt. Phone E-mail \*Most correspondence from our office will be via e-mail. Please list one you check regularly.

Current GPA Are you a current WSU student?  
 Yes. My WSU PID # is: \_\_\_\_\_  
 No Status during program  Freshman  Senior  
 Sophomore  Graduate  
 Junior  Other

Are you an honors student?  Yes  No Are you a DCE student?  Yes  No Date of Birth (MM/DD/YYYY) Gender  M  F

Declared Major \_\_\_\_\_ Desired term(s) for exchange:  
Fall 20\_\_ Winter 20\_\_ Fall & Winter 20\_\_ - 20\_\_

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

Name Relationship to you

Current Address

City State ZIP Code

Home Phone Work Phone Cell Phone Fax

E-mail

### For Office Use Only

Received:

Fee received:

Data Entry:

Sent to Dept:

# Study Abroad Application

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

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

How did you learn about this study abroad program?

- Faculty Member     Study Abroad Office     Class     Study Abroad Fair  
 Former Participant     Other \_\_\_\_\_

*Please describe*

Have you traveled abroad for longer than a week?

If yes, where? \_\_\_\_\_

*Please describe*

I understand I will be notified of my acceptance by an official letter sent via e-mail from the Study Abroad and Global Programs Office that will be sent 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.

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 Study Abroad and Global Programs Office 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 Study Abroad and Global Programs Office to provide relevant information from your educational records to your parents and any of relevant third parties:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if applicant is under age 18): \_\_\_\_\_  
(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:**

**Wayne State University-Salford University  
Undergraduate Exchange Program  
In Urban Affairs**

**DEPARTMENTAL APPROVAL FORM**

Student Name \_\_\_\_\_ WSU ID# \_\_\_\_\_

**To the Undergraduate Major Advisor/Chair:** Please indicate with your signature that the above named student has informed your department of his/her intention to apply for the WSU–University of Salford Urban Studies exchange and that he/she has discussed with the appropriate person the courses he/she must cover while at Salford in order to make satisfactory progress towards the completion of his/her major at WSU. It is expected that students will fill out a plan of work with their major department. A listing of Salford courses open to WSU exchange students is available.

**Salford courses student is allowed to take** (student will register for 4 of the 6 courses listed below):

Fall Salford Course	WSU Course	Number of Credits
1.		
2.		
3.		
4.		
5.		
6.		

Winter Salford Course	WSU Course	Number of Credits
1.		
2.		
3.		
4.		
5.		
6.		

**Comments:**

Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

Date: \_\_\_\_\_

**Departmental Approval Form**

Wayne State University-Salford University Undergraduate Exchange Program In Urban Affairs

CONFIDENTIAL EVALUATION FORM

To the Student:

Please fill in your name and the name of an instructor or advisor who is acquainted with your academic work. Deliver this form with a pre-addressed envelope for his or her use in sending the completed response directly to:

Study Abroad and Global Programs

5155 Gullen Mall
1600 David Adamany Undergraduate Library
Detroit, MI 48202

Applicant's Name (print) \_\_\_\_\_

Recommender's Name \_\_\_\_\_

You may voluntarily waive your right to have access to a specific Letter or Recommendation/Evaluation written about you in accordance with the Federal Family Education Rights and Privacy Act of 1974 by signing and dating this certificate:

I waive, relinquish and disclaim all my rights to have access to the Letter of Recommendation/Evaluation described above.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

To the Evaluator:

The student above has applied to the Wayne State University-Salford University Undergraduate Exchange Program and is seeking your recommendation. Your frank appraisal of this student may help in our attempt to determine whether his/her acceptance would be beneficial to the student and to our program.

If the student has signed the release above, the confidentiality of your comments will be strictly maintained.

1. How long have you known the applicant? \_\_\_\_\_

2. In what context have you known the applicant? \_\_\_\_\_

3. Please rank the applicant on the traits below; circle the most appropriate ranking for each trait using the following scale: (U=Unkown; 1=Poor; 2=Fair; 3=Good; 4=Excellent).

Academic ability U 1 2 3 4

Adaptability U 1 2 3 4

Ability to communicate U 1 2 3 4

Ability to cooperate U 1 2 3 4

Emotional stability U 1 2 3 4

Intellectual curiosity U 1 2 3 4

Dedication & seriousness U 1 2 3 4

Self-reliance & independence U 1 2 3 4

Ability to deal with stress U 1 2 3 4



# Personal Statement

## Wayne State University-Salford University Undergraduate Exchange Program In Urban Affairs

### PERSONAL STATEMENT

This personal statement should be completed, signed and submitted with your other supporting materials. A signed copy of this statement should be given to your academic advisor before securing their approval.

Please *type* a brief (approximately 250 words) statement about why you are interested in studying at the University of Salford, what types of courses you would be most interested in taking, and what benefit you hope to take away from your education abroad. *Your statement must be submitted on this form.*

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

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