

## **Global Education STUDY ABROAD APPLICATION**

Study Abroad Program:	
Quarter and Year:Pro	gram Length (Spain only):   2 weeks   3 weeks
Personal Information	
Last Name:	First Name:
Email Address:	
Phone:	Date of Birth:
Country of Citizenship:	
Campus: SCC SFCC Other	Student ID#
Dates of Attendance: From	To
Field of Study:	
Please attach the following to your application	ı:
1. Unofficial copy of most recent college transcript.	
<ol> <li>Two letters of recommendation. Recommendations from non-relatives are preferred. At least one letter of recommendation must be from a teacher. Letters of recommendation may be submitted directly to Global Education via email to <a href="mailto:CCS.StudyAbroad@ccs.spokane.edu">CCS.StudyAbroad@ccs.spokane.edu</a>.</li> <li>Personal statement. In one page or less, please describe the reasons you would like to study abroad, what you hope to accomplish while studying abroad, and how you hope to incorporate the experience into your academic or career plans.</li> </ol>	
Please read and sign the following: "I understand that a non-refundable \$500 deposit toward the program fee is required to reserve my participation in the program, and that the remainder of the program fee is due in full no later than the first day of the quarter in which the program will take place. I understand that I am personally responsible for meeting all required deadlines and payment obligations or I risk being penalized. I understand that I am applying for a full-time academic college program, and will be expected to participate in and complete all required coursework including regular classroom attendance and participation in academic activities. I understand that as a participant of this CCS program, I am subject to the SCC/ SFCC Student Code of Conduct. I further certify that I am in good academic standing at my home institution, and that I am not subject to any action at law or facing any pending legal action that would preclude me from departing or re-entering the USA. The information I have provided in this application is true and accurate and subject to verification."	
Signature:	Date:

**SCC Campus** Building 15, Office 114 509-533-4114

SFCC Campus Building 2, Office 103 509-533-4114