



STUDY ABROAD

32 Sayre Drive, Coxe Hall
Bethlehem, PA 18015

Phone: 610-758-3351
Fax: 610-758-5156
Email: studyabroad@lehigh.edu

STUDENT INFORMATION SHEET

PART A - STUDENT INFORMATION

NAME: _____

(First)	(MI)	(Last)	GENDER: <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
- -	/ /		

LU ID / BANNER NO. _____ BIRTH DATE (mm/dd/yyyy) _____

CELL PHONE NO. _____ HOME PHONE NO. _____ EMAIL ADDRESS _____

CITIZENSHIP: USA OTHER (Please list): _____

PASSPORT NUMBER: _____ EXPIRATION DATE: / / _____

CHECK HERE IF YOU ARE CURRENTLY APPLYING FOR A PASSPORT

Note: If you do not have a current passport, you should apply or renew your passport immediately

Note: Check with your program provider and/or the study broad office concerning visa requirements

PART B - PARENT/GUARDIAN INFORMATION

Name: _____

Relationship: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Emergency Contact: YES NO

Name: _____

Relationship: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Emergency Contact: YES NO

PART C - ACADEMIC INFORMATION

Currently attending Lehigh: YES NO If no, please indicate institution: _____

I am currently a college: Freshman Sophomore Junior Senior

Cumulative GPA: _____ Enrolled in Global Citizen Program: YES NO

College of: Arts & Sciences Business & Economics Education Engineering & Applied Science

Major: _____ Minor: _____

PART D - PROGRAM INFORMATION

SELECT TERM:

ACADEMIC YEAR 20_____-20_____

FALL 20_____

WINTER 20_____

WINTER (Faculty Led) 20_____

SPRING 20_____

SUMMER 20_____

SUMMER (Faculty Led) 20_____

PROGRAM CHOICE:

1ST Choice:

2nd Choice:

PART E - ACADEMIC ADVISOR APPROVAL (Signature Required – for semester only)

I approve this student’s study abroad plan, and we have discussed how it fits into their academic requirements and goals.

ADVISOR SIGNATURE

TODAY’S DATE

ADVISOR NAME (PLEASE PRINT)

DEPARTMENT

PART F - STUDENT (Signature Required)

I certify that the information I have provided on this application form is correct. I understand I must keep the Study Abroad Office updated on any changes to my study abroad plans and/or my status at Lehigh University.

STUDENT SIGNATURE

TODAY’S DATE

STUDENT NAME (PLEASE PRINT)

Please be sure you’ve completed all components of the application.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Lehigh Faculty Led Study Abroad

Course Selection Form

Summer / Winter

Dear Student: Please select the course(s) you would like to take when attending your Faculty Led program abroad.

STUDENT INFORMATION:

Name:	Lehigh ID#:	Email:
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SUMMER PROGRAMS

Lehigh in Prague: Choose 1 Pair of Courses for 6 total credits

CRN:	CSB 314 & ACCT 311	BIS Practicum (3) & Accounting Information Systems (3)
CRN:	CSB 314 & Mgmt 372-11	BIS Practicum (3) & Int'l Bus in European Union (3)
CRN:	CSB 314 & CSB 297	BIS Practicum (3) & CSB Independent Study (3)
CRN:	Mgmt 372-11 & ECO 209	Int'l Bus in European Union (3) & Comparative Eco Systems (3)
CRN:	Mgmt 372-10 & Mgmt 372-11	Intro to Int'l Bus (3) & Int'l Bus in European Union (3)
CRN:	Eco 371-10 & Eco 209	Special Topics (3) & Comparative Ecosystems (3)

Lehigh in Prague (Budapest): Choose 1 Pair of courses for 6 total credits

CRN:	CSB 314 & CSB 297	BIS Practicum (3) & CSB Independent Study (3)
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Lehigh in Ireland: Choose 1 course from Practicum or Supervised Research for 3 credits

CRN:	ECO 273	Community Consulting Practicum (3 credits)
CRN:	BIOE 350	Special Topics (3 credits)
CRN:	BIOS 161	Special Topics in Biological Sciences (3 credits)
CRN:	CEE 211	Research Problems (3 credits)
CRN:	CHE 185	Undergraduate Research (3 credits)
CRN:	EES 293	International Practicum (3 credits)
CRN:	ECO 195	Supervised Research (3 credits)
CRN:	ENGL 282	Professional Internship (3 credits)
CRN:	DES 375	Design Internship (3 credits)
CRN:	PSYC 161	Supervised Research (3 credits)
CRN:	JOUR 232	Journalism Practicum (3 credits)
CRN:	SSP 393	Supervised Research (3 credits)

ALSO Choose 1 Irish Studies Course for 3 credits

CRN:	ANTH 198	Negotiating Identity: Irish Traditional Music and Dance (3 credits)
CRN:	ENGL 195	Representing Ireland – Literature and Film (3 credits)
CRN:	HIST 104	Irish History (3 credits)
CRN:	SSP 100	Irish Society (3 credits)

Lehigh in Turkey: Choose 1 course for 6 total credits

CRN:	GCP 176	The Islamic Heritage of Turkey (6 credits)
CRN:	REL 176	The Islamic Heritage of Turkey (6 credits)

Lehigh in Shanghai: Choose Asia 386 and one CHIN course for 6 total credits

CRN:	ASIA 386	Chinese Culture in a Multinational Worksite (3 credits)
CRN:	CHIN 091	Chinese Language and Culture Abroad (3 credits)
CRN:	CHIN 191	Chinese Language and Culture Abroad (3 credits)
CRN:	CHIN 291	Chinese Language and Culture Abroad (3 credits)

Lehigh in Vicenza: Must choose both courses

CRN:	ARCH 211	The Architecture of Carlo Scarpa/Theory and Practice (3 credits)
CRN:	ARCH 212	Architectural Drawing/Analysis and Expression (3 credits)

Microfinance- Ghana: Must choose this course

CRN:	ECO 195	Microfinance Immersion Seminar (1 credit)
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Lehigh in Belgium: Choose 2 courses for 6 total credits – Must take at least 1 lecture course

CRN:	HIST 355	The Destruction and Reconstruction of Europe (3 credits)
CRN:	HIST 371-10	Independent Study in History (3 credits)
CRN:	MKT 371-11	Special Topics in European Marketing (3 credits)
CRN:	MKT 372-10	European Marketing Strategies (3 credits)
CRN:	MKT 360-10	Marketing Practicum (3 credits)

Lehigh in Dortmund: Choose 2 courses for 6 total credits – List your course selections below

(Please check: <http://www.summerprogram.uni-dortmund.de/index.php?sid=3> for course information)

CRN:		
CRN:		

WINTER PROGRAMS

Lehigh in Costa Rica: Choose 1 course for 3 total credits

CRN:	ES-122	Sustainable Development, The Costa Rica Experience (3 credits)
CRN:	EES-042	The Natural History of Costa Rica (3 credits)

Lehigh in Martinique: Choose 1 course for 3 total credits (Humanities)

CRN:	HIST 196	From colonization to globalization: History and Culture of Martinique
CRN:	AAS 196	From colonization to globalization: History and Culture of Martinique
CRN:	FREN 196	From colonization to globalization: History and Culture of Martinique
CRN:	MLL 196	From colonization to globalization: History and Culture of Martinique
CRN:	POLS 196	From colonization to globalization: History and Culture of Martinique

Lehigh in Spain:

CRN:	MLL 195	Tradition and Transition, Spain in the New Millennium (3 credits)
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Student Signature: _____

Date: _____

Lehigh University, Study Abroad Office
32 Sayre Drive, Coxe Hall, Bethlehem, PA 18015

STUDENT UNDERSTANDING AND AGREEMENT

Lehigh Study Abroad

Winter and Summer Study Abroad Programs

Reference in this document to Lehigh and its agents shall include the legal guardians or other adults responsible for the applicant or participant. Reference to program shall include the host institution abroad and its staff, faculty, or agents responsible for the applicant or participant. The terms student, applicant, participant, and 'you' are used interchangeably.

COST AND PAYMENTS

1. DEPOSIT AND PAYMENT: A \$200 non-refundable deposit, plus a \$50 application fee, is due at the time of application payable by check (made payable to Lehigh University) or credit card. Deposits should be submitted to the Bursar's office only. Upon acceptance into the program, the balance of the program cost will be billed with full payment due by the date on the invoice. The deposit is transferable to another program running concurrent with the program to which the student applied; however, it is not transferable to a program running during a different year or a different term. **The only circumstances under which a deposit will be refunded is if the student is not accepted into the program by the program's director(s) or if the program gets canceled due to an insufficient amount of participants.**
2. ACCEPTANCE: Once a student applies to a study abroad program, the student is deemed to agree to enroll in the program for which the student applied, if the student's application is accepted. Program directors may elect to require interviews, written statements, or both, before making the decision to accept a student.
3. PROGRAM COST AND BILLING: Refer to program brochure for the cost of the program. Billing will occur as usual, with tuition bills coming from the Lehigh University Bursar's Office. All tuition payment policies apply.
4. GRADUATE STUDENTS: Graduate students are eligible to participate on Faculty-led programs with the program Director's approval. All graduate students must take the program for credit and will be assessed the graduate per credit hour tuition applicable for your particular college.
5. WITHDRAWAL: By completion of the application, the student is deemed enrolled in the program. To withdraw from the program, the student must notify the Study Abroad Office in writing. Since Lehigh must often undertake substantial financial commitment on behalf of students prior to the beginning of study abroad programs, student will be charged for all non-recoverable funds Lehigh University has committed on a student's behalf including but not limited to airfare and housing costs. Students are responsible for purchasing their own trip interruption/cancellation insurance. **The deposit submitted at the time of application is non-refundable.**
6. DISMISSAL PRIOR TO DEPARTURE: If a student's conduct after application to the program leads to disciplinary probation, the student will be dropped from the program and will forfeit the deposit as well as any unrecoverable money Lehigh has committed on behalf of the student up to the date of dismissal. If a student is dismissed from the program at any point after the program starts, the student will be billed the full cost of the program (i.e., no refund will be given).
7. PROGRAM CANCELLATION: See the Lehigh Study Abroad office website for full details on Lehigh's cancellation policy.

REQUIREMENTS AND COMPETENCIES

1. ELIGIBILITY: A participant must be a full-time student at Lehigh or her/his home post-secondary school in the semester prior to studying abroad. Participants must be in good academic standing at the time of application to the program. Participants may not be on disciplinary probation the semester prior to participation, or during program. Because each participant's behavior reflects on Lehigh University, all participant's disciplinary history is reviewed prior to approval to study abroad; those whose records indicate a history of inappropriate conduct should expect to have their cases reviewed in depth by the Dean of Students office and the Study Abroad office. Such records will be considered in the final decision about whether a student may study abroad.

Have you have been on disciplinary probation at Lehigh in the past? Check one: Yes ____; No ____.

Are you are currently on disciplinary probation? Check one: Yes ____; No ____.

In either case, attach an explanation. In rare cases, some eligibility limitations may be petitioned.

2. COMPETENCIES: In order to be able to participate in credit-bearing activities conducted off-campus, a student must demonstrate the competencies outlined below. Inability to demonstrate these competencies at any point may result in a review of student participation by the appropriate faculty/staff at Lehigh. Questions concerning these items, below, may be directed to the Program Director, the Director of the Study Abroad office or the Associate Dean of Students.

- a. Ability to be flexible and adapt to new, unexpected circumstances as they occur. Navigate independently and/or appropriately in a new and /or unfamiliar environment. (Ex: live in a host dorm with non-Lehigh students; use urban/rural public transportation systems.)

- b. Ability to be responsible for all known personal medical and psychological needs prior to participation in this off-campus activity, as well as the ability to be functionally stable for at least six months prior to participation.
- c. Capacity to respect the host culture and its different language(s), values, customs, belief systems.
- d. Knowledge of, and willingness to uphold, reasonable and appropriate standards for living and learning environments.

3. COURSE OVERLOAD POLICY: Students participating on a Faculty Led program cannot enroll in any on line courses during the same summer session that students are attending a Faculty-led program. Therefore, students cannot take both an on line course and attend a Faculty-led program during the same summer session. See the Registrar's web site for full details on Lehigh's overload policy.

My signature here indicates that I meet the competencies listed above, and I understand that if at any point evidence arises demonstrating that I cannot fulfill or meet these basic competencies, my case will be subject to review by appropriate Lehigh University faculty/staff.

Student Signature: _____

Date: _____

INTERNATIONAL TRAVEL

1. AIRLINE RESERVATIONS: Participants are responsible for their own travel arrangements.

2. IDENTIFICATION DOCUMENTS: Each participant must have his/her own PASSPORT which is valid for at least six months beyond the last day of the program. Participants are responsible for obtaining this document; forms may be obtained at www.travel.state.gov. Please note that it may take up to eight weeks to process an application for a U.S. passport.

Submit a copy of your passport when applying, or advise if you are currently in the process of applying for a passport:

Have: _____ Applying: _____ Today's date: _____

A copy of your passport MUST be submitted prior to departure.

3. VISAS: Obtaining proper study/travel visas is the responsibility of the participant. Even US citizens may need a visa for travel before or after the program to specific countries other than the US or the country of the program. Participants must be aware that obtaining visas may be a lengthy process involving persistence and attention to detail. Costs associated with visas are the participant's responsibility. Please check: www.travel.state.gov for entry requirements.

4. WEB REGISTRATION: Participants agree to register their international travel prior to departure on Banner (under "Personal Information"). Directions will be sent to participants, and they must register by the deadline stated in those instructions.

CONDITIONS OF PARTICIPATION TO WHICH THE PARTICIPANT AGREES:

1. In consideration of the use of premises or facilities owned or operated by Lehigh University and/or in consideration of permitting me to participate in this activity, on behalf of myself, my heirs, executors, administrators, successors or assigns, I hereby release and forever discharge Lehigh University, its agents, servants, and employees of and from any and all manner of actions, causes of action, suits, damages, claims, and demands, on account of personal injury, including death, or any other cause whatsoever, which I may have against them by reason of or arising out of my participation in this activity.

2. Lehigh, including program faculty, is not responsible for my welfare during periods of independent travel or during any absences from the program.

3. Lehigh, including program faculty, reserves the right to take whatever action is warranted under circumstances relating to my health and safety, and I shall not hold Lehigh responsible for such decisions or actions. I understand that I am required to take out an insurance policy to cover medical services and treatment during the period abroad, if I am not sufficiently covered by my existing health insurance plan (other than the International Student Identity Card). I take full responsibility for knowledge of any limitations in my insurance policy that apply to travel abroad.

4. I hereby authorize Lehigh and its agents, at their discretion and without obtaining any further consent, to arrange medical services and treatment as may be deemed necessary for me at my/my parents' and/or guardians' sole risk and expense. If deemed necessary or desirable by Lehigh, I may be returned to the United States by commercial airline or other means at my expense for medical treatment.

5. *I understand and agree to be bound by the rules and policies in the Lehigh University Student Handbook, specifically, the code of conduct.*

Initial here: _____

6. During periods of free time Lehigh does not accept liability for the consequences of my decisions which may negatively or adversely impact me. Free time is determined to mean unscheduled time when students are not under the direction or supervision of the program or its agents.

7. I will at all times comply with the rules, standards, and instructions for student conduct and behavior of Lehigh and the hosting institution(s). Lehigh reserves the right to enforce appropriate standards of conduct and specifically reserves the right to terminate my participation for failure to maintain these standards or for any actions of conduct which Lehigh considers to be incompatible with the interest, harmony, comfort or welfare of participants. In particular, either possession/consumption of controlled substances (by U.S. definition, or that of any other country visited) or alcohol impairment/abuse may result in immediate termination from the program. I understand that I am expected to act responsibly at all times and I agree to do so.

Initial here: _____

8. Alcohol and drug abuse and/or excess will not be tolerated. If I am found impaired from participating in expected classroom attendance, group activities, excursions, and/or conduct disruptive of or incompatible with the program purpose and objectives, Lehigh and/or the host program may exercise the authority to facilitate my immediate expulsion from the program and I will return to the U.S. Unacceptable conduct (including, but not limited to): unauthorized absence from the program when attendance/participation is expected, harassment and/or abuse, assault, vandalism, public disturbance, gambling, solicitation, and any illegal activity.

Initial here: _____

9. If I should have my participation terminated in accordance with the conditions above, then Lehigh shall have the right to require me to leave the program without refund of tuition and fees paid to Lehigh, and, if I return to the U.S. prior to the established end date of the program, without academic credit. If directed to return to the United States by Lehigh University, I agree to abide by all such directions.

Initial here: _____

10. I agree to indemnify Lehigh and its agents against any consequences of my actions when I am not observing and complying with Lehigh's or a hosting institution's rules, standards and instructions. Lehigh will not accept liability for any act I commit, willful or negligent, which results in damages or injury to persons or property, and I agree to undertake full reimbursement to the injured party should such occasion rise.

11. Lehigh will endeavor to adhere to all arrangements made but nevertheless reserves the right to change or alter any arrangement concerning the location and/or content of the program should this be necessary.

12. I will pay all charges due according to the regularly scheduled billing by Lehigh University and I am responsible for the timely payment of all other charges incurred by me or on my behalf while on the program. I agree to pay all tuition and fees associated with participation in the program and assume responsibility for any damages, losses, or charges for extra services in my accommodations or the common areas and grounds of the host institutions which may result from my actions or omissions.

13. I agree to attend the program at its established location according to its established schedule, including all regularly scheduled orientations, classes, excursions, and exams.

14. I am liable for any additional unforeseen costs (housing, board, travel fees, etc.) associated with my participation in the program in the event of an emergency that detains me outside of the program and/or planned program dates. I am responsible for the purchase of trip interruption/cancellation insurance.

15. I accept responsibility for any damage/theft done to my room or any other part of my housing/residence and its equipment, including telephones, vending machines, washers and dryers and so forth. Public area damage/theft that cannot be attributed to specific individuals will be billed on a pro-rated basis to residence of that suite, section, floor, or building in accordance with the Lehigh damage Billing Policies and Procedures. I agree to be held responsible for the actions of guests I allow to enter housing / residences. Willful destruction of property is cause for disciplinary action. All damage billing incurs a 15% service charge.

16. I consent to the distribution of information relevant to my participation in a study abroad program to the parent/guardian contact that I have specified as my emergency contact. I consent to let the study abroad office discuss academic and disciplinary records for the purpose of ensuring my continued health, safety, and student status, as it pertains to my study abroad experience.

17. I consent to the use of my photographs, and also my comments and likeness, by Lehigh for publicity purposes.

By signing here, I confirm that I have read and understand these conditions and agree to be bound by them.

Student Signature:

Date:

Study Abroad Health Information Form

Every Lehigh University study abroad participant must **read, sign, and return** this form, indicating that health issues relating to participation in study abroad programs are understood.

1. Medical Conditions

Lehigh University recommends that all students get a thorough physical examination before participating in study abroad activities. Discuss with your physician your intent to study abroad and get advice for managing your physical and emotional health while in another country. Discuss your health condition (allergies, medications, disabilities, psychological treatment, dietary requirements, and medical needs) with your physician, and seriously consider the appropriateness of your participation in study in your chosen host country.

→Actions:

- a. If you have any medical or psychological condition that may require attention while you are abroad, discuss this with your physician before going abroad.
- b. Ask your physician if your medication will be readily accessible in your host country.
- c. Take necessary medications in original, labeled containers **and** written prescriptions with you.
- d. It is advisable that you carry a letter from your doctor explaining the use of your medication so it is not suspected as contraband.
- e. Get necessary immunizations well in advance of your departure. See the CDC web page for relevant immunizations. www.cdc.gov/travel

2. Medical Facilities/Services

Medical facilities and services will **not** be the same in every country. It is important to understand as much as possible about the facilities and services in your host country in the event you should need them.

→Actions:

- a. Be sure you get information in your program-specific on-site orientation about medical facilities and services in your host country/city.
- b. You will need to understand where to go for common health needs (i.e., cold, stomachache, flu) and where to go for emergencies or major medical needs.
- c. You will need to know how medical services are paid for (i.e., out-of-pocket by the student, host country or institution, insurance, etc.).
- d. Understand your insurance coverage before going abroad. (Does your insurance policy cover you in another country? What is covered? What is not? How do you make claims?)
- e. You will need to know who to contact in case of medical emergency.

3. Disabilities

Students interested in disability services during a study abroad program should be in contact with Cheryl Ashcroft, Office of Academic Support Services. Please note that the ADA regulation for “reasonable accommodations” provided on the Lehigh campus may differ and/or not be available in the host country.

→Actions:

- a. If you have not already registered with Lehigh’s Office of Academic Support Services, contact them at 610-758-4152.
- b. Make an appointment with the Director of Academic Support Services to discuss services available

in the host country.

4. Mental Health

Mental health support services vary worldwide. Thus, students may not have access to mental health services in some countries. Whether students have utilized mental health services in the past or not, it is important for students to know if, what, and where those services are available in their host country.

- a. All students should be prepared for cultural adjustment before studying abroad. Although preparation will not prevent students from experiencing cultural adjustment problems, it will prepare them for the symptoms, the expected cycle, and some helpful advice for a successful adjustment.
- b. Students who are currently using, or who in the past have used, mental health services, should contact the Lehigh University Counseling Center before going abroad. The Counseling Center should be advised as to your needs in case a telephone consultation is required while abroad.
- c. Students who are currently involved with mental health services should discuss the advisability of participating in a study abroad program, and issues related to cultural adjustment, with their mental health practitioner.

5. Emergency Protocol

The majority of students participating in study abroad never experience an emergency while abroad. However any emergency is less traumatic when you are prepared to cope with it. It will make you feel more comfortable if you take the time to prepare an emergency protocol when you arrive at your host location.

→Actions:

- a. Carry some form of identification with you at all times (name, host country address, host country phone number, passport and visa number).
- b. Carry emergency numbers and contact with you (local police, study abroad/residential coordinator in host country, parent/guardian/emergency contact at home, Lehigh Study Abroad contact information, embassy in host country, physician and mental health practitioner at home, insurance contact information).
- c. Know where the local hospitals are located and how to get there.
- d. By preparing yourself to respond to different types of emergencies you will feel more confident that you know what to do in the rare event that an emergency should occur (natural disaster, civil unrest/terrorism, medical/mental health injury or trauma, criminal violence or trauma).

I have received and read and understand the information provided in this document and will abide by the recommendations in preparing for my study abroad experience.

Printed Name

Signature

Date

Lehigh University Academic Support Services

Office of the Dean of Students (DOS)

212 University Center

REQUEST FOR DISABILITY SUPPORT SERVICES

It is the policy of Lehigh University to ensure that all University goods, services, facilities, privileges, advantages, and accommodations are meaningfully accessible to qualified persons with disabilities in accordance with the American with Disabilities Act (ADA) of 1990, Section 504 of the Rehabilitation Act of 1973, and other pertinent federal, state, and local disability anti-discrimination laws.

Reasonable accommodations will be made on an individual basis, if available in the host country and/or host institution, and may differ from Lehigh University. It is the responsibility of persons with disabilities, however, to seek available assistance and to make his/her needs known to the university.

If you are an individual with a disability who may require assistance or academic accommodations from Lehigh University, please complete this form and send it to the address indicated below. The Office of Academic Support Services may need to consult with the Study Abroad Office to ensure appropriate accommodations.

After submitting this form, make an appointment with Cheryl Ashcroft, 212 University Center, phone 610-758-4152.

Please cut along this line and retain the top portion of this form for your reference.

Name: _____	Nature of Disability:
Address: _____	<input type="checkbox"/> Visual
City/State/Zip: _____	<input type="checkbox"/> Hearing
Telephone: _____	<input type="checkbox"/> Mobility
Lehigh Identification No.: _____	<input type="checkbox"/> Speech
Study Abroad Country/Program: _____	<input type="checkbox"/> Medical
Study Abroad Enrollment:	<input type="checkbox"/> Psychological
Fall: Winter: Spring: Summer:	<input type="checkbox"/> ADHD
	<input type="checkbox"/> Learning Disability
	<input type="checkbox"/> Other _____

Send Form to:

Lehigh University
Academic Support Services,
212 University Center, 29 Trembley Drive,
Bethlehem, PA 18015

Lehigh ISIC Card Application

Please indicate which card you are applying for:

Student (ISIC) Teacher (ITIC)

Terms & Conditions

I hereby certify that this information is true and understand that any false statements on my part, may result in forfeiture of all card benefits.

Applicant's Signature

_____/_____/_____
Date

Study Abroad Program

Term

Personal Information:

Name (First, Last)

Institution/School Name

Expected Graduation (MM/YY)

Date of Birth (i.e., April/22/1982)

School ID#

Campus Address:

Street/Box #

City

State

Zip

Telephone

E-mail Address

Permanent Address:

Street/Box #

City

State

Zip

Telephone

Applications must be submitted with:

- TWO passport sized photos w/ name on back (CVS/Rite Aid/AAA)
- Copy of student/faculty ID card
- Payment (if applicable)

Photo

Copy of School Id Card

OFFICE USE ONLY

Card #: _____

Validity: _____

For more information, visit:
www.myisic.com