

International Program Center  
Bemidji State University  
Deputy 103, #13

# Sinosummer 2008

## Application Form

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

- REQUIRES A NON-REFUNDABLE DEPOSIT OF \$150.00 Include the attached Study Abroad Debit Slip when making payment to BSU Cashiers Office at 202 Deputy Hall. (218-755-2046)
- Applicants are required to be at the sophomore level or higher and must have a minimum GPA of 2.0.
- Students are required to submit an unofficial transcript with each study abroad application.
- Non-BSU students must also include a "Special Student Application form". Contact the Int'l Program Center at 218/755-4096 or e-mail [studybemidji@bemidjstate.edu](mailto:studybemidji@bemidjstate.edu) to request the form.
- If you intend to apply for financial aid, you are advised to visit with the BSU Financial Aid Office prior to submitting your program application.

### Please print

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

Name: \_\_\_\_\_ BSU ID or SSN: \_\_\_\_\_

(Do not use a nickname or abbreviation. This is the name that will be given to the airline--must match your passport.)

### Current Address (address until time of departure):

\_\_\_\_\_ Local Phone: \_\_\_\_\_

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

Country of Citizenship: \_\_\_\_\_ Hometown: \_\_\_\_\_

Birthplace: \_\_\_\_\_ Do you have a passport? \_\_\_ Yes \_\_\_ No

### Permanent Address: (if different from current address, e.g. address of parent, guardian, spouse)

\_\_\_\_\_ Phone: \_\_\_\_\_

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

### Emergency Contact (person that BSU may release information to during your absence):

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

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

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

Major: \_\_\_\_\_ Class standing (circle one) Fr So Jr Sr Grad Other \_\_\_\_\_

Previous travel experience: \_\_\_\_\_

The following questions are optional.

Gender (circle one): Female Male Age at time of departure: \_\_\_\_\_ Date of birth: \_\_\_\_\_

This travel study experience may include activities such as hikes, walking tours and other physical activities to be detailed by the faculty director. Visited sites, modes of transportation, and housing accommodations may not be handicap accessible. Requests for reasonable accommodations will be carefully considered, but may not be available, depending on the specific program. You may wish to consult with the program faculty director for additional details about the trip before submitting your application.

I certify that all statements made on this study abroad application in its entirety are true and accurate.

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

Complete and present this study abroad application, along with your receipt from the Cashier's Office to the International Program Center in Deputy 103. (See attached Study Abroad Debit Slip) If you not currently enrolled on campus, mail this application, a Special Student Application form, the Study Abroad Debit Slip, and a check for \$150 payable to BSU to: The Intl Program Center, Deputy 103, 1500 Birchmont Drive NE, Bemidji State University, Bemidji, MN 56601-2699.

STUDY ABROAD DEBIT SLIP  
Bemidji State University

Accounting Services  
Deputy Hall, Room 202

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Complete and present this document, along with your  
non-refundable deposit of \$150 to:

**BSU Cashiers**  
**Deputy Hall 202**

**Sinosummer**

**Cost Center:**

\_\_\_ 95007 \_\_\_

**Term:** \_\_\_ 20091 \_\_\_

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

BSU ID or SSN: \_\_\_\_\_

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

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

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