SEMESTER ABROAD EXCHANGE PROGRAM AT UNIVERSIDAD DEL CENTRO EDUCATIVO LATINO AMERICANO (UCEL) IN ARGENTINA
APPLICATION FOR FALL 2012
(Please print legibly)

Complete this form, make a photocopy of the completed form, and turn them both in to the Office of International Education in Maple House at 705 D St.
Application deadline: 4:30 pm on Friday, Mar. 16, 2012

_____ Male_____ Female_____ Birthdate (MM/DD/YY)_____
Last name First name Middle Name

Student ID# _____Unit# _____ E-Mail _____

Local Mailing address (if different than Unit #): Home Mailing Address:

_____ _____
Street Street
_____ _____
City State ZIP City State ZIP

Your preferred phone number ( ) _____ Cell phone provider_____ Simpson G.P.A._____

Expected month & year of graduation _____ Major(s) _____

Emergency contact person _____ Relationship to you_____ Her/his email:_____

Home phone ( )_____ Work phone ( )_____ Cell phone ( )_____

Are you a U.S. Citizen? Y N Do you have a U.S. Passport? Y N If so, its # is_____

A copy of your passport data page or a copy of your completed passport application (with SSN removed) **is required with this application.** *Important Note: Passports must be valid at least through June 2013.*

Your signature verifies the following:

1. **My current degree audit is attached.**
2. **My personal statement is attached.** The statement is a 1-2 page essay (printed, double-spaced) describing how this overseas experience fits into your studies at Simpson, what your overall academic objectives are, and what specifically you hope to gain from this program that will enhance your educational experience.
3. I authorize Simpson College to hold a credit balance on my student account if a credit balance is created by my financial assistance, including Title IV assistance, to cover my program deposit in the amount of $200. This authorization allows Simpson College to cover the program as a miscellaneous charge and to hold a credit balance longer than the statutory 14 days.
4. I give my permission for the Office of International Education to obtain records from the Office of Student Development, the Business Office, and the Registrar's Office.
5. **If I must cancel my participation in this program, I will do this in writing to the Office of International Education and will abide by the cancellation policies listed on Simpson's study abroad website.**

_____ _____
Signature of Applicant Date

For office use:

_____ _____
Date and time application was received: Received by: