APPLICATION CHECKLIST

Engineering Study Abroad in Troyes, France
Summer 2014

Please return the following documents to the UB Study Abroad office prior to the application deadline of Friday, December 6, 2013:

• UB application form
• Study Statement, signed by your academic advisor
• 1 Academic Recommendation
• Copy of your passport (if available)
  If you do not have a valid passport, please provide the date you applied for a passport on the UB application form.
• Official home campus transcript for Non-UB students (as soon as available)
Application Information

Name: ____________________________

Last    First     Middle

UB Study Abroad Program:

Program/University    City     Country

Please list any other programs you are applying for:

Program/University    City   Country    Administering SUNY Campus

Program/University    City   Country    Administering SUNY Campus

Term of Study for which you are applying: (check the box and include the year next to the appropriate term, e.g. Fall 2012)

☐ Fall_____  ☐ Spring____  ☐ Year_____  ☐ Summer___  ☐ Intersession___  ☐ Other: _______________________

How did you learn about this program? ____________________________________________________________

Personal Information

Date of Birth: __________ / ______ / ______

Place of Birth: __________________________

City / State    Country

Gender: ☐ Male    ☐ Female

Passport #: ________________

Passport Expiration Date: __________

Month & Year

Married? ☐ No  ☐ Yes

Country of Citizenship: __________________________

Visa Status (if not US citizen): __________________________

Home Campus: __________________________

Campus Student ID #: __________________________

Local Mailing Address:

Street Address     Apt #

City    State    Zip Code

Current Telephone: (____)

Campus Email Address (use block letters)

My local address can be used until: __________ / ______ / ______

Mo          Day         Year

Please notify us of any changes in your contact information.

Permanent/Home Address: (if different)

Street Address     Apt #

City    State    Zip Code

Permanent/Home Telephone: (____)

Alternate Email Address (use block letters)

Academic Information

Current Standing: ☐ Freshman  ☐ Sophomore  ☐ Junior  ☐ Senior  ☐ Master  ☐ PhD  ☐ Other: _______________________

Major(s): __________________________

Minor(s): __________________________

Academic Advisor: __________________________

Expected date of graduation: __________________________

GPA: Major_____________  Cumulative_____________

Degree Credits: Completed____  Currently Enrolled____
Your Name     UB Study Abroad Program     Term of Study

Academic Background

Please list below any other colleges or universities you have attended.

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Dates of Attendance</th>
<th>Credits</th>
<th>Degrees/Certificates Received</th>
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Please list below any courses you have taken (including language) that have prepared you for this program.

<table>
<thead>
<tr>
<th>Course Title</th>
<th>High School or College?</th>
<th>Credits</th>
<th>Grade Received</th>
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Contact Information

Person to contact in case of emergency:  

Name: ____________________________ Relationship to you: ____________________________
Street Address: ____________________________ Apt Number: ____________________________
City/State: ____________________________ Country (if not US): ____________________________
Zip/Postal Code: ____________________________
Home Phone: (_______)_______  Cell Phone: (_______)_______
Email Address: ________________

Parent or Guardian (if under 21):

Name: ____________________________ Relationship to you: ____________________________
Street Address: ____________________________ Apt Number: ____________________________
City/State: ____________________________ Country (if not US): ____________________________
Zip/Postal Code: ____________________________
Home Phone: (_______)_______  Cell Phone: (_______)_______
Email Address: ________________

Financial Information

To assist you with financial planning for study abroad, please indicate the estimated amounts you expect to have available from the following sources:


Other Sources (please describe): ____________________________

Student Declaration

I certify that all information on this application form is true to the best of my knowledge.

Student’s Signature: ____________________________ Date: ____________________________

Home Campus Study Abroad Signature (for students from other SUNY campuses)

I am aware that this student is applying to the University at Buffalo study abroad program(s) listed on page 1.

Name of Campus Study Abroad Contact: ____________________________ Title: ____________________________ Office: ____________________________

Signature: ____________________________ Date: ____________________________ SUNY Campus: ____________________________
Study Statement

Student Information

Name: ____________________________ Campus Student ID #: __________________________

Last    First    MI

UB Study Abroad Program:

<table>
<thead>
<tr>
<th>Program/University</th>
<th>City/Country</th>
<th>Term of Study</th>
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</table>

I confirm that the information in my Study Statement is true to the best of my knowledge and that I have discussed my proposed study abroad program with my academic advisor.

Student Signature: ____________________________ Date: ____________________________

Study Statement

Please write a Study Statement in essay format. It should be typed on separate pages and attached to this form. The maximum length is two typed pages.

Your Study Statement should include:

• Your academic reasons for selecting this program.
• How this study abroad program fits with your academic program and your overall academic goals. You may also include how this program will benefit your personal and professional development.
• Any prior experience with studying, traveling, or living in another country.
• Any additional information that may be helpful in evaluating your candidacy for study abroad.

When complete, review the Study Statement with your academic advisor and ask him/her to complete the Academic Advisor Approval section of this form. Then submit this form and your typed statement to the UB Study Abroad office with the rest of your application.

Academic Advisor Approval

To the Academic Advisor: Please discuss this proposed study abroad program with your advisee and how it will complement his or her academic program. If you approve of this study abroad application, please indicate your approval with your signature below. We recommend keeping a copy of this signed form for the student's file.

I confirm that I have discussed this proposed study abroad program with this student and approve of his/her application for study abroad.

Name of Academic Advisor: ____________________________ Title: ____________________________ Department: ____________________________

Signature: ____________________________ Date: ____________________________ Institution (if not UB): ____________________________

Study Abroad Programs, University at Buffalo, 210 Talbert Hall, Buffalo, NY 14260
Tel: 716 645 3912 • Fax: 716 645 6197 • studyabroad@buffalo.edu • www.buffalo.edu/studyabroad
# Academic Recommendation for UB Study Abroad Programs

**Student Name:**

**Campus Student ID #:**

**UB Study Abroad Program:**

**Program/University**

**City/Country**

**Term of Study**

I waive my right to access this reference completed by ____________________________

□ Yes □ No

**Name of Reference**

**Student Signature:**

**Date:**

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**To the Student:**

Please give this to a home campus faculty member who has taught you and is able to comment on your academic qualifications for study abroad. You should ask for the recommendation to be returned to you in a sealed envelope with the reference’s signature across the seal. Submit it to the UB Study Abroad office with the rest of your application.

**To the Reference:**

Please provide your assessment of this student’s candidacy for study abroad to the best of your knowledge. You may complete the assessment questions below and/or attach a separate letter. Please return the recommendation to the student in a sealed envelope with your signature across the seal.

**How long and in what capacity have you known the student?**

<table>
<thead>
<tr>
<th>Academic attributes</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
<th>No Evaluation</th>
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<tr>
<td>Competence in field of study</td>
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<td>Academic interest and motivation</td>
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<td>Capacity for independent study</td>
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<td>Resourcefulness</td>
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<td>Reliability</td>
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<td>Academic integrity</td>
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<th>Non-academic attributes</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
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<th>No Evaluation</th>
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<td>Level of maturity</td>
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<td>Ability to adapt to new situations</td>
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<td>Self-confidence and self-esteem</td>
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<td>Ability to relate well to others</td>
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<td>Emotional stability</td>
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<td>Open-mindedness</td>
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<td>Personal integrity</td>
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Please state your opinion of this candidate’s ability to participate and succeed in the proposed study abroad program, weighing both strong and weak points.

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**Name of Reference**  
**Title**  
**Department**

**Signature**

**Date**

**Institution (if not UB)**