WICHITA STATE UNIVERSITY

Study Abroad Scholarship Application

INSTRUCTIONS: In order to apply for the Study Abroad Scholarship, students must complete the following items. All items must be received at the below address no later than 5:00 p.m. on the dates listed below.

1) Student must be currently enrolled in a full-time course of study at Wichita State University.
2) Undergraduate students must have completed a minimum of 30 credit hours by the time of departure.
   Graduate students must have completed a minimum of 9 graduate credit hours by the time of departure.
3) Student must apply for a study abroad program approved by the Office of International Education.
4) Student must provide recommendation letters from two WSU faculty members (sent directly from references).
5) Submit a statement explaining your reasons for wanting to study abroad as well as the relationship of the study abroad program to your course of study. Document should not exceed one typed page on a separate sheet of paper.
6) Submit an official copy of your WSU transcript, all transcripts submitted become property of Wichita State University.

IMPORTANT INFORMATION:

1) Above materials must be received by semester deadlines listed below. If you have already provided references and an essay with your Study Abroad Application you will not be required to submit them again.
2) Scholarship funds must be used for the Study Abroad program listed and approved. Any changes must first be approved by the Office of International Education.
3) All recipients of scholarship funds must provide proof of attendance within one month of completion of the Study Abroad program. If proof is not provided, the student will be charged the full scholarship amount, and a hold will be placed on their record until the amount has been paid in full.
4) Applicants may only receive this scholarship once during their attendance at WSU.
5) All applicants who receive this scholarship agree to promote Study Abroad in conjunction with the Office of International Education.

IMPORTANT DATES

SCHOLARSHIP APPLICATION DEADLINES

<table>
<thead>
<tr>
<th>Semester</th>
<th>Deadline</th>
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<tbody>
<tr>
<td>Spring Semester</td>
<td>December 1</td>
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<tr>
<td>Summer Session</td>
<td>April 1</td>
</tr>
<tr>
<td>Fall Semester</td>
<td>July 1</td>
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</tbody>
</table>

Study Abroad
Office of International Education
Wichita State University
Wichita, Kansas 67260-0122

Telephone: (316) 978-3232
Fax: (316) 978-3777
Internet: www.wichita.edu/studyabroad
E-mail: studyabroad@wichita.edu
WICHITA STATE UNIVERSITY
Study Abroad Scholarship Application

APPLICANT INFORMATION

Desired Semester of Study:  
- Spring Semester, 20__  
- Summer Session, 20__  
- Fall Semester, 20__

Gender:  
- Male  
- Female

MyWSU ID: ________________________________

Full Name: ____________________________________________________________________________________________________________________________

_Last Name  First Name  Middle Name (if any)

MAILING ADDRESS:

Telephone: ________________________________

or   ________________________________

Primary e-mail: ________________________________

Second e-mail: ________________________________

Desired Semester of Study:  
- Spring Semester, 20__  
- Summer Session, 20__  
- Fall Semester, 20__

Gender:  
- Male  
- Female

Full Name: ____________________________________________________________________________________________________________________________

_Last Name  First Name  Middle Name (if any)

MAILING ADDRESS:

Telephone: ________________________________

or   ________________________________

Primary e-mail: ________________________________

Second e-mail: ________________________________

Gender:  
- Male  
- Female

Full Name: ____________________________________________________________________________________________________________________________

_Last Name  First Name  Middle Name (if any)

MAILING ADDRESS:

Telephone: ________________________________

or   ________________________________

Primary e-mail: ________________________________

Second e-mail: ________________________________

Gender:  
- Male  
- Female

Full Name: ____________________________________________________________________________________________________________________________

_Last Name  First Name  Middle Name (if any)

MAILING ADDRESS:

Telephone: ________________________________

or   ________________________________

Primary e-mail: ________________________________

Second e-mail: ________________________________

Important:
I understand and agree to abide by the requirements stated in the above application instructions. In addition, I verify that the above information is true and complete.

____________________________________________________  _____________________________________
APPLICANT'S SIGNATURE               DATE

PREVIOUS OVERSEAS STUDY OR TRAVEL EXPERIENCE

Please list all previous travel or study abroad experience you have including that from other universities or institutions. List them in order of attendance.

CITY AND COUNTRY

NAME OF FOREIGN SCHOOL OR INSTITUTION (IF ATTENDED)

NAME OF U.S. INSTITUTION FROM WHICH PROGRAM WAS THROUGH

NAME OF FOREIGN SCHOOL OR INSTITUTION (IF ATTENDED)

NAME OF U.S. INSTITUTION FROM WHICH PROGRAM WAS THROUGH

NAME OF FOREIGN SCHOOL OR INSTITUTION (IF ATTENDED)

NAME OF U.S. INSTITUTION FROM WHICH PROGRAM WAS THROUGH

ARE YOU CURRENTLY RECEIVING FEDERAL FINANCIAL AID?

If yes, please list sources and amounts if known:

________________________________________________________________________________________________________

________________________________________________________________________________________________________

APPLICANT SIGNATURE

IMPORTANT: I understand and agree to abide by the requirements stated in the above application instructions. In addition, I verify that the above information is true and complete.

____________________________________________________  _____________________________________
APPLICANT'S SIGNATURE               DATE

revised 07/08