



STUDY ABROAD APPLICATION

(For Outgoing Students)

ELIGIBILITY:

- 1) Applicants must be Wichita State University students in good academic standing.
- 2) Students must have and maintain a minimum 2.5 GPA for most programs.
- 3) Undergraduate students must have completed a minimum of 30 credit hours and graduate students must have completed a minimum of 12 graduate credit hours by the time of departure for most programs, except for some faculty-led programs.

INSTRUCTIONS: In order to apply for a study abroad program, students must complete the following items:

- 1) **Complete the application form.**
- 2) **Submit the completed application form** by email to studyabroad@wichita.edu or mail the form to the address below, or bring it to the Shocker Success Center, Office of International Education - Lower Level 003.
- 3) **Pay the non-refundable \$30 application fee.** (The \$30 fee will be added to the student's WSU account upon receipt of the application form and can be paid through the myWSU student account suite under the myFinances tab.)

ALL APPLICATION FORMS MUST HAVE STUDENT'S SIGNATURE.

PRIORITY DEADLINES

Fall Semester
Spring Semester
Summer Term
Winter Term

February 15th
September 15th
Varies
September 1st



PERSONAL INFORMATION

Full Name _____
Last Name _____ First Name _____ Middle (if any) _____

My WSU ID: _____ Date of Birth (mm/dd/yyyy): _____

Telephone: _____ Gender: _____

Primary e-mail: _____ Alternate e-mail: _____

Current Mailing Address: _____

Apt/Suite: _____ City: _____ State: _____ Zip code: _____

ACADEMIC INFORMATION

Major(s): _____ Minor, if any: _____

Cumulative Overall GPA: _____ Expected Graduation Date: _____

What will be your classification at the beginning of your study abroad program?

Sophomore Junior Senior Graduate

1. Foreign language(s) studied: _____

Current level and years of language studied: _____

2. Foreign language(s) studied: _____

Current level and years of language studied: _____

Have you ever been on academic probation? _____ if so, please explain: _____

PROGRAM INFORMATION

Desired Semester of Study:

Spring Semester, 20 ____ Summer Term, 20 ____ Fall Semester, 20 ____ Winter Term, 20 ____ Academic Year, 20 ____-20 ____

Country or region of interest: _____

If known, university(ies) of interest: _____

If not an exchange program, name of program provider: _____

Will you be traveling on a U.S. passport? _____

If not, on what country's passport will you travel? _____

Do you currently have a valid passport? _____

If not, when will you apply for one? _____

FINANCIAL AID

Are you currently receiving financial aid from WSU or the federal government? Yes No

Will you be applying for financial aid for study abroad? Yes No

PREVIOUS OVERSEAS TRAVEL EXPERIENCE

Country: _____

Dates Visited: From (mm/yyyy) _____ To (mm/yyyy) _____

Program (if applicable) or purpose: _____

Country: _____

Dates Visited: From (mm/yyyy) _____ To (mm/yyyy) _____

Program (if applicable) or purpose: _____

PREVIOUS OVERSEAS STUDY EXPERIENCE

Country: _____

Dates Attended: From (mm/yyyy) _____ To (mm/yyyy) _____

Name of foreign school or institution: _____

Name of U.S. institution or company directing program: _____

RELEASE INFORMATION

The collection, retention, and dissemination of your records and personal information is subject to the federal regulations under the Family Education Rights and Privacy Act of 1974. It is therefore necessary to obtain your permission to release information collected on the application, in your letters of recommendation, and in your transcripts.

- 1) I hereby release information contained in my applications for admission and for study abroad, letters of recommendation, and transcripts to the Office of International Education for review and approval of my study abroad application. I also grant permission for access to medical, disciplinary, and counseling files that have bearing on my application.
- 2) I also hereby release information contained in my application, letters of recommendation, and transcripts to the overseas institution where I wish to be placed.

RELEASE FOR OFF CAMPUS STUDY

Wichita State University does not make any warranties or guarantees of any kind, expressed or implied, regarding any off-campus program in which a student may participate. The University assumes no responsibility and disclaims any liability, damages, or injury suffered by any student by reason of the negligent or wrongful acts or failure to act of any person or institution with whom the University may make arrangements for any off-campus study program.

INDEBTEDNESS

Failure to make full payment of all required fees or to resolve other debts to Wichita State University or the host institution may result in the cancellation of pre-registration for the following semester, denial of registration until payment is received, and/or disenrollment at WSU or the host institution. In addition, a student must fulfill all financial obligations to WSU before receiving grade reports, transcripts, or a diploma from Wichita State University.

Students must register and pay regular tuition and fees for a full course load for semester long programs. A minimum of 12 credit hours per semester for undergraduate students and 9 credit hours per semester for Graduate Students. Summer and short-term programs will vary in regards to credit hours and costs. If your study abroad credits will apply towards your current degree program at Wichita State University, you may be eligible for Federal Student Financial Aid for these credits.

Please contact the Office of Financial Aid for more information.

CANCELLATION POLICY

A late cancellation fee of \$100 will be charged to the student if they cancel their study abroad program 30 or more days after the published deadlines in our publications or on our website at <https://wichita.edu/SADeadlines>.

SIGNATURE

IMPORTANT: I have read the above paragraphs and acknowledge that I understand them completely and accurately. By signing below I acknowledge my agreement to be bound by their terms as a condition of my participation in any off-campus programs sanctioned by Wichita State University. In addition, I verify that the above information is true and complete.

Printed Name:

First Name

Last Name

Applicant's Signature

Date

*Please print this application form and sign.

PLEASE RETURN YOUR APPLICATION TO:

STUDY ABROAD
INTERNATIONAL EDUCATION
WICHITA STATE UNIVERSITY
1845 FAIRMOUNT ST
WICHITA, KS 67260-0122

OR

EMAIL A SCANNED COPY TO
STUDYABROAD@WICHITA.EDU