

## STUDY ABROAD SCHOLARSHIP APPLICATION

Financial Aid for study abroad is sometimes available through individual academic departments at Wichita State. The Office of International Education administers all other study abroad scholarships which are made possible through the funding sources listed on our website. All of the scholarships administered through the Office of International Education require the same application, and applicants do not need to designate a particular scholarship in their application. Applicants will automatically be considered for any funds in which they meet the eligibility requirements (please see eligibility requirements on our website).

Applicants must agree to the conditions listed on the Scholarship Acceptance Form to receive a scholarship. Specific conditions on the Scholarship Acceptance Form can be found on our website.

Study Abroad Scholarship website: [www.wichita.edu/studyabroadscholarships](http://www.wichita.edu/studyabroadscholarships)

**Instructions to Apply:**

1. Complete the attached application form either by typing or printing very clearly.
2. Submit a 1-page essay answering the following 3 questions. Your 1-page essay should be composed in paragraph format, not as numbered responses to the questions in the application.
  1. How will your chosen study abroad program benefit you in your future academic and professional goals?
    - a. Please include basic information (location and courses) and describe your individual reasons for studying abroad within this answer.
  2. How will you be a good representative of WSU during your study abroad program?
  3. How will you promote and help increase awareness of WSU study abroad programs among your peers and our WSU campus community when you return from your study abroad program?

### **IMPORTANT DATES** SCHOLARSHIP APPLICATION DEADLINES

**Fall Semester**  
**Spring Semester**  
**Summer Term**  
**Winter Term**

**February 15**  
**September 15**  
**March 1**  
**September 15**

**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](mailto:STUDYABROAD@WICHITA.EDU)



## STUDY ABROAD SCHOLARSHIP APPLICATION

### APPLICANT INFORMATION

DESIRED SEMESTER OF STUDY:  SPRING SEMESTER, 20\_\_\_\_\_  FALL SEMESTER, 20\_\_\_\_\_

SUMMER TERM, 20\_\_\_\_\_  WINTER TERM, 20\_\_\_\_\_

MYWSU ID: \_\_\_\_\_ GENDER: \_\_\_\_\_

COUNTRY OF CITIZENSHIP: \_\_\_\_\_ STATE OF RESIDENCY: \_\_\_\_\_

FULL NAME: \_\_\_\_\_ LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE NAME (IF ANY) \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

APT/SUITE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

PRIMARY E-MAIL: \_\_\_\_\_ ALTERNATE E-MAIL: \_\_\_\_\_

MAJOR(S): \_\_\_\_\_ MINOR(S): \_\_\_\_\_

EXPECTED GRADUATION DATE (MM/YYYY): \_\_\_\_\_ CURRENT OVERALL GPA: \_\_\_\_\_

NAME OF STUDY ABROAD PROGRAM/UNIVERSITY: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ NUMBER OF CREDIT HOURS ENROLLED (FOR STUDY ABROAD PROGRAM): \_\_\_\_\_

DATES OF PROGRAM (MM/YYYY): FROM: \_\_\_\_\_ TO: \_\_\_\_\_ ESTIMATED COST OF PROGRAM: \_\_\_\_\_  
(INCLUDING TUITION, LIVING EXPENSES AND AIRFARE)

### PREVIOUS STUDY ABROAD EXPERIENCE

PLEASE LIST ALL STUDY ABROAD EXPERIENCE YOU HAVE INCLUDING THAT FROM OTHER UNIVERSITIES OR INSTITUTIONS. LIST THEM IN ORDER OF ATTENDANCE.

1) NAME OF FOREIGN SCHOOL OR INSTITUTION (IF ATTENDED): \_\_\_\_\_  
DATES VISITED OR ATTENDED (MM/YYYY): FROM: \_\_\_\_\_ TO: \_\_\_\_\_ CITY AND COUNTRY: \_\_\_\_\_  
NAME OF U.S. INSTITUTION FROM WHICH PROGRAM WAS THROUGH: \_\_\_\_\_

2) NAME OF FOREIGN SCHOOL OR INSTITUTION (IF ATTENDED): \_\_\_\_\_  
DATES VISITED OR ATTENDED (MM/YYYY): FROM: \_\_\_\_\_ TO: \_\_\_\_\_ CITY AND COUNTRY: \_\_\_\_\_  
NAME OF U.S. INSTITUTION FROM WHICH PROGRAM WAS THROUGH: \_\_\_\_\_

### FINANCIAL AID INFORMATION

ARE YOU CURRENTLY OR DO YOU ANTICIPATE RECEIVING FINANCIAL AID? IF YES, PLEASE LIST SOURCES (INCLUDING SCHOLARSHIPS) 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 (MM/DD/YYYY)