**Instructions**

- This Application Form is used for most Overseas Academic Programs sponsored by any State University of New York campus.
- **Check** with the administering campus for any special instructions needed to complete this application (also see section below).
- **Complete** this application form. If you are interested in more than one program, rank them in order of your preference. If the programs are administered by different SUNY schools, send a set of copies of all forms to each administering campus. All choices will be considered with equal prospect of acceptance. If you are accepted into several programs, you will be able to choose the one in which you wish to participate.
- **Take** your application to the Study Abroad Office at your home campus for signature.
- **Keep** a photocopy of your completed application (OAP 1) for your records.
- **Submit** the application and all supporting documents to the administering campus as each portion is completed.
- **Send** an official academic transcript from your current school and any other colleges where you have completed coursework to the Administering SUNY Campus. Federal laws prohibit the campus from obtaining this document: you must request it yourself.
- **Note**: It is recommended that you send in your materials well before the deadline. Check with the administering campus for the deadline. Late applications are sometimes considered on a space-available basis. If the deadline has passed, contact the administering campus for instructions.

**Checklist**

A complete Application includes all of the following:

- [ ] Completed Application Form (Form OAP 1, two pages)
- [ ] Study Statement (Form OAP 2, one page)
- [ ] Foreign Language Proficiency Form (Form OAP 3, one page)
  (Not required for programs in which all courses are taught in English.)
- [ ] Confidential Academic Reference Form #1 (Form OAP 4, one page)
- [ ] Confidential Academic Reference Form #2 (Form OAP 4, one page)
- [ ] Official Transcript(s) from all colleges / universities attended

**Special Campus Instructions:**


Please type or print with ballpoint pen.

Application for:

Name: __________________________________________ Last          First          Middle

Program Location Abroad: (You may choose to apply for several programs. All choices will be considered with equal prospect of success.)

1st Choice: __________________________________________
University: __________________________ City: __________________________ Country: __________________________ Administering SUNY Campus: __________________________

2nd Choice: __________________________________________
University: __________________________ City: __________________________ Country: __________________________ Administering SUNY Campus: __________________________

3rd Choice: __________________________________________
University: __________________________ City: __________________________ Country: __________________________ Administering SUNY Campus: __________________________

Study Period for which you are applying – check one:

□ Fall  □ Spring  □ Academic Year  □ Summer  □ Intersession Year: _____________ Session (if applicable): _____________

How did you learn about this program?
____________________________________________________________________________________

Personal Information (Please notify us of any change of address or telephone number.)

Birthdate: _____________ / _____________ / _____________  Place of Birth: __________________________  Sex (M/F): _____ Married? (Y/N) _____


School ID #: __________________________  Home Campus: __________________________

Local Address: __________________________
Number, Street: __________________________  Telephone: (______)____________________

E-mail: __________________________

City: __________________________  State: __________________________  Zip Code: __________________________

My local address can be used until the following date: _____________ / _____________ / _____________  E-mail valid until: _____________ / _____________ / _____________

Permanent Address: __________________________
Number, Street: __________________________  Telephone: (______)____________________

City: __________________________  County: __________________________  State: __________________________  Zip Code: __________________________

Academic Status

Major: __________________________  Minor: __________________________

Specialty within major field: __________________________  Academic Advisor: __________________________

□ Freshman  □ Sophomore  □ Junior  □ Senior  □ Master  □ Doctorate  GPA (major, estimated): ______ GPA (cumulative): ______

Semester Credits Completed To Date:  Undergraduate: ______  Graduate: ______

Semester Credits Currently Enrolled:  Undergraduate: ______  Graduate: ______
### Academic Background

<table>
<thead>
<tr>
<th>Name</th>
<th>Dates (from – to)</th>
<th>Credits</th>
<th>Degrees</th>
<th>Honors</th>
</tr>
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</tbody>
</table>

List language courses (except English) or other courses you have taken that have prepared you for this program:

<table>
<thead>
<tr>
<th>Title</th>
<th>Credits</th>
<th>Grade</th>
<th>H.S. or College?</th>
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<tbody>
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</tbody>
</table>

### Contact Information

(\textbf{Please notify us of any change of address or telephone number.})

Name and Address of Parent or Guardian (if under 21):

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<thead>
<tr>
<th>Name</th>
<th>Home Telephone</th>
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</table>

Name and Address of person to contact in case of emergency:

<table>
<thead>
<tr>
<th>Name</th>
<th>Home Telephone</th>
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</thead>
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</table>

### Miscellaneous

Please describe your plans for financing your participation in an overseas study program by indicating the amount of money you expect to receive from each source.

- Financial Aid: ____
- Scholarships: ____
- Grants: ____
- Loans: ____
- Parent / Guardian Assistance: ____
- Savings: ____

Other Assistance Sources (please describe):

State briefly any additional information that may be useful in evaluating your candidacy, including any travel or residence in other countries or regions of the U.S. or anything else you wish to point out about yourself or your academic record:

|________________________________________________________________________|
|________________________________________________________________________|
|________________________________________________________________________|

### Home Campus Study Abroad Office Signature

I am aware that this student is applying to the SUNY study abroad program(s) listed on page 1 of form OAP 1:

Your Name (please print) ___________ Title, Department: _______________________

Signature: ______________________ Date: ___________ Institution: ______________
To the Student
Write a concise statement of your proposed program of study abroad and how it will be related to your present academic program. Also describe the personal benefits you expect to receive from the program. Use the reverse side of this sheet and/or an additional page, if necessary. Sign your statement and submit it to your academic advisor for approval and signature. Then send it to the International Education Office of the Administering SUNY Campus.

To the Advisor
Please discuss with your advisee how this proposed program of study will complement his or her academic program. It is suggested that a copy of this signed form be retained in the student's advisement file.

Name and Title of Academic Advisor    Advisor’s Signature    Date
To the Student: This form is for programs in which all or a portion of the coursework is taught in a language other than English. Please complete this portion of the form and sign. Ask your current professor or the person who has most recently taught you in a language course to complete the rest. Please check all appropriate boxes.

a) I will have completed the required foreign language coursework prior to the start of the program through:
   □ Coursework  OR  □ I have equivalent preparation (please explain):

b) While abroad,
   □ I will be taking language courses at the level of:  □ beginner  □ intermediate  □ advanced
   □ I will be taking courses in the host language designed for foreign students
   □ I will be taking regular university courses taught in the host language

c) Estimate your proficiency in the language of greatest importance in the program (except English):

<table>
<thead>
<tr>
<th>Language:________________________</th>
<th>Excellent</th>
<th>Good</th>
<th>Fair</th>
<th>Poor</th>
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<tbody>
<tr>
<td>Speaking</td>
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<td>Listening Comprehension</td>
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<td>Reading</td>
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<tr>
<td>Writing</td>
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</table>

I waive my right to access this reference completed by___________________________________________  □ Yes  □ No

Name of Reference:__________________________________________  Student's Signature:___________________________  Date:__________

To the Reference: The student named above is applying for the designated State University of New York overseas academic program. We would appreciate your comment on the applicant's language abilities. Please check the boxes that most accurately describe your judgment. Please return this form to the International Education Office at above address.

Reading in his/her field
   □ Excellent  □ Very Good  □ Good  □ Fair  □ Poor  □ No Ability
Understanding lectures
   □ Excellent  □ Very Good  □ Good  □ Fair  □ Poor  □ No Ability
Composition
   □ Excellent  □ Very Good  □ Good  □ Fair  □ Poor  □ No Ability
Conversation
   □ Excellent  □ Very Good  □ Good  □ Fair  □ Poor  □ No Ability

Please refer to the boxes that the student has checked at the top of this form and rate the student's readiness for such coursework.
The applicant:  □ should have no difficulty on this program.
   □ should be able to manage adequately after a short period of adjustment abroad.
   □ should be able to manage adequately after some additional formal language training.
   □ appears to require considerable training in the language before the necessary competence could be achieved.

Please indicate the experience with the student upon which your evaluation has been made.

Please add any comments you feel would aid in understanding the candidate's qualifications (you may use the back of this form, if necessary).

Your Name (please print)________________________________ Title, Department:________________________________
Signature:________________________________________  Date:__________  Institution:________________________________
To the Student

This **academic reference** should be given to a professor who knows you well and is able to judge your academic qualifications for study abroad. A letter of recommendation on letterhead is also acceptable.

As this letter is confidential, it should be sent directly to the Administering SUNY Campus by the person writing the letter. You must provide a stamped, addressed envelope for this purpose. You may submit this letter yourself if it has been placed in a sealed envelope and has been signed over the seal by the person writing the reference.

I waive my right to access this reference completed by _________________________________________________

Name of Reference

__☐ Yes  ☐ No__

To the Reference

*Please return this form to the International Education Office at above address.*

The student named above is applying for the designated State University of New York overseas academic program. We would appreciate your assessment of the applicant's attributes with which you are familiar. You may also attach a letter of recommendation.

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

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<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 major or specialization</td>
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<td>Academic interest and motivation</td>
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<td>Resourcefulness</td>
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<td>Integrity</td>
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<tr>
<th>Non-academic attributes</th>
<th>Excellent</th>
<th>Very Good</th>
<th>Good</th>
<th>Fair</th>
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<td>Level of maturity</td>
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<td>Ability to adapt to new or unstructured circumstances</td>
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<td>Emotional stability</td>
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<td>Open-mindedness</td>
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<td>Integrity</td>
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Please state frankly your opinion of this candidate's ability to suitably represent both their home campus and the USA in a study abroad program, weighing both strong and weak points. Please use the space below or the reverse side of this page. You may also add or attach a letter of recommendation.

Your Name (please print)_________________________Title, Department:_________________________

Signature:____________________________________Date:_________________Institution:_________________________
STATE UNIVERSITY OF NEW YORK
Overseas Academic Programs

CONFIDENTIAL REFERENCE FORM
Academic Reference #2

Your Name
Program Location Abroad
Administering SUNY Campus

Address of International Education Office at Administering SUNY Campus

To the Student

This academic reference should be given to a professor who knows you well and is able to judge your academic qualifications for study abroad. A letter of recommendation on letterhead is also acceptable.

As this letter is confidential, it should be sent directly to the Administering SUNY Campus by the person writing the letter. You must provide a stamped, addressed envelope for this purpose. You may submit this letter yourself if it has been placed in a sealed envelope and has been signed over the seal by the person writing the reference.

I waive my right to access this reference completed by ________________________________

☐ Yes ☐ No

Student's Signature: ________________________ Date: ________________________

To the Reference

Please return this form to the International Education Office at above address.

The student named above is applying for the designated State University of New York overseas academic program. We would appreciate your assessment of the applicant's attributes with which you are familiar. You may also attach a letter of recommendation.

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

Academic attributes

Competence in major or specialization

Excellent Very Good Good Fair Poor No Evaluation

Academic interest and motivation

Capacity for independent study

Resourcefulness

Reliability

Integrity

Non-academic attributes

Level of maturity

Ability to adapt to new or unstructured circumstances

Self-confidence and self-esteem

Ability to relate well to others

Emotional stability

Open-mindedness

Integrity

Please state frankly your opinion of this candidate's ability to suitably represent both their home campus and the USA in a study abroad program, weighing both strong and weak points. Please use the space below or the reverse side of this page. You may also add or attach a letter of recommendation.

Your Name (please print) ________________________ Title, Department: ________________________

Signature: ________________________ Date: ________________________ Institution: ________________________