

**APPLICATION FOR
THE 7th ANNUAL U of L STUDY ABROAD PROGRAM IN PANAMA**
Sponsored by the Latin American and Latino Studies Program and the Communication Department
MAY 7, 2009 TO JUNE 5, 2009

I. PERSONAL DATA

Name _____
(Last Name) (Middle Name) (First)

Current Address _____
(Street name & number) (City) (State) (Zip Code)

Permanent Address _____
(Street name & number) (City) (State) (Zip Code)

Phone Numbers _____
(Area code & cell number) (Area code & permanent #) U of L E-Mail Address

Birth date _____ Student I.D. # _____

Sex: () Male () Female () Smoker () Non-smoker

Passport # _____ OR

“I will apply for a passport by January 1, 2009.” _____
Signature of Applicant

Passport Expiration Date: _____

***Provide copy of passport or passport application.**

II. ACADEMIC INFORMATION

Are you a degree seeking student of UofL? () yes () no

What degree are you pursuing: _____

Major _____ Minor _____

Academic Area of Interest _____

Class Standing (Freshman, Sophomore, etc. or Graduate Student) _____

GPA _____ ***Students must have a 3.0 GPA, be pursuing a degree at UofL.**

Previous Study Abroad Experience in Spanish- Speaking Country (Place and Length of Study):

IV: APPLICATION PROCEDURES:

1. Fill out the application and attach a brief one to two-page typed (double-spaced) statement in which you explain why you would like to participate in the program and what you hope to gain from the experience. Explain how this study abroad program will benefit you personally and professionally. Please indicate if you have traveled abroad before, when you traveled, for how long, and to what countries. A well-written statement will provide the selection committee with additional valuable information about your motivation and interest in the program. As part of the application process, Berta Calvert, the Panama Program Director, will interview you.
2. **Payment of fees:**
 - **Program Total Cost: \$3,666**
 - **An initial application fee of \$200 must be submitted with the application** in order to reserve your place in the program. This fee is part of the down payment and is refundable until the point that funds have been expended on your behalf.
3. **Application deadline is January 12, 2009.**
 - **A \$100 late fee will be assessed to applicants who apply after the January 12, 2009 application deadline.**
4. **A second payment of \$2,000 is due on January 26, 2009.**
5. **The balance of \$1,466 (or less if you have received financial assistance) is due on February 26, 2009.** Once money has been expended on your behalf, it is not refundable. There will be no refunds after February 26, 2009.
6. Documents that **MUST** be submitted with application:
 - Three (3) copies of the application and the essay.
 - Three (3) copies of your unofficial transcript
 - Two (2) recommendations in sealed and signed envelopes using the attached forms.
7. As part of the application, participants must allow 30 minutes to fill out the required forms that will authorize students to leave the country. Documents required:
 - Student Release and Assumption of Risk Form **(will be provided)**
 - Emergency Information Sheet **(will be provided)**
 - Student Conduct Agreement **(will be provided)**
 - Release of Confidential Information **(will be provided)**
 - Medical History Questionnaire **(will be provided)**
 - A copy of your passport **(student should provide)**
 - A copy of the International Student ID Card **(student should provide)**
8. Applications and checks (made payable to: **University of Louisville**) should be submitted in person to:
Ms. Laine López
Assistant Program Director
329 Humanities Building
LALS Program Office Hum 329C
lyorte01@louisville.edu or 502-693-6925
***Please, schedule an appointment by email. Fall '08 Office Hrs: Wed. 10 a.m. – 3 p.m.
Thurs. 10 a.m. – 4 p.m.**

For further information, contact:

- Berta Calvert, Panama Program Director; bacalv01@gwise.louisville.edu, 502-852-0728 Cell: 270-872-5768
- Joy Hart, Panama Program Co-Director, joy.hart@louisville.edu, 502-852-6976
- Laine López, Assistant Program Director; lyorte01@louisville.edu 502-693-6925
- Dr. Rhonda Buchanan, Director of Latin American and Latino Studies: rhondabuchanan@louisville.edu 852-0502 or 852-2034
- Consult the web page at: <http://louisville.edu/latinamericanstudies>

V. APPLICATION DECLARATION:

Having read the above, I hereby apply for admission to the UofL Study Abroad Program in Panama. I agree to make payments for the various fees associated with this program as specified in the Application Procedures. I understand that the \$200.00 application fee, which is part of my down payment, is not refundable once funds have been expended on my behalf. I further acknowledge that I am responsible for the entire fee for my airline ticket, which is booked in advance of my final payment, and agree to pay any cancellation penalties imposed by providers of services to the program in the event that I am unable to participate as planned.

Further, I have read and understand the procedures for admission, registration, and payment of fees, will familiarize myself with all regulations and the **CODE OF CONDUCT** established by the University of Louisville, and have provided information about medical or psychological conditions I have that could affect my full participation in activities of the UofL Study Abroad Program in Panama.

Signature of Applicant
(Must be 18 years of age or older)

Date

VI. RECOMMENDATIONS

Please provide the names of the two (2) professors who will submit recommendations on your behalf:

1. _____
2. _____

VII. UofL STUDY ABROAD PROGRAM IN PANAMA CHECK LIST

All information must be complete.

- Three (3) copies of application**
- Three (3) copies of unofficial transcript**
- Two (2) recommendations**
- A copy of the passport**
- A copy of the International Student Identification Card**
- Student Release and Assumption of Risk Form**
- Emergency Information Sheet**
- Student Conduct Agreement**
- Medical History Questionnaire**
- Release of Confidential Information**
- \$200 Initial application fee**
- Second payment of \$2000**
- Final payment of the remaining balance**

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7th Annual Study Abroad Program in Panama

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May 7- June 5, 2009

RECOMMENDATION FORM

TO BE COMPLETED BY APPLICANT:

Applicant's name:

Name of Faculty Recommender:

I do / do not (circle one) waive my right to see this recommendation.

Signature: _____ Date: _____

TO BE COMPLETED BY FACULTY RECOMMENDER:

In what capacity have you known the applicant?

PLEASE COMMENT BRIEFLY ON THE FOLLOWING:

1) Applicant's Academic Performance:

2) Do you think that the applicant would adapt well to living abroad for one month in a Spanish-speaking country?

3) Other comments or concerns:

Recommendation:

_____ Recommend with confidence

_____ Recommend with reservations (please explain in #3 above.)

_____ Do not recommend

Faculty Name: _____

Title: _____

Address: _____

Phone: _____

E-mail: _____

Signature: _____

Date: _____

ALL APPLICATION MATERIALS ARE DUE BY MONDAY, JANUARY 12, 2009.

Please submit this form directly to the student in a sealed and signed envelope. The student should turn the application in to **Laine López**, Assistant Director of the 7th Annual Study Abroad Program in Panama.

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_____ Do not recommend

Faculty Name: _____

Title: _____

Address: _____

Phone: _____

E-mail: _____

Signature: _____

Date: _____

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