APPLICATION FOR QUARTER COURSES

Please indicate the program you wish to apply for: (If choosing more than one, please indicate preference, 1 = first choice, 2 = second choice) NOTE: You may apply for and participate in both a Q3 and Q4 course.

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Location</th>
<th>Professor</th>
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<tbody>
<tr>
<td>GLS 100</td>
<td></td>
<td></td>
<td>Madrid Q3 - Inst. McKeown</td>
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<tr>
<td>BIO 301</td>
<td></td>
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<td>US Virgin Islands Q4 - Prof. Balko</td>
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<tr>
<td>BRC 370</td>
<td>Broadcasting in London Q3</td>
<td></td>
<td>Prof. Pieraccini</td>
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<tr>
<td>CHE 401</td>
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<td>Scotland Q4 - Profs. Schneider/Raymond</td>
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Please complete and return this application along with your deposit of $250.00.
Money Order should be made payable to: SUCO Auxiliary Services

1. Name: ____________________________________________
   Last: ____________________________  First: ____________________________  Initial: ____________________________

2. Student ID Number: ____________________________  Soc. Sec No. ____________________________

3. Class Status: (check one) Freshman ______  Sophomore ______  Junior ______  Senior ______
   GPA: _________  Major: ____________________________________________

4. Birthdate: ___/___/____  mo / dy / yr

5. Sex:  M ____  F ____

6. E-mail Address: ____________________________________________

7. Country of Citizenship: ____________________________________________

8. City and Country of Birth: ____________________________________________

9. Visa Status if Not a US Citizen: ____________________________________________

10. Campus/Local Address: ____________________________________________
    Local Phone Number: ____________________________________________

11. Permanent Address: ____________________________________________
    Home Phone Number: ____________________________________________

Signature: ____________________________ Date: ____________________________