Education Abroad
Exchange Program Application

Application Deadlines: Spring: Oct. 6 / Summer, Fall, & Academic Year: March 16
Submit your completed application to the International Center (Buchtel Hall 202) or edabroad@uakron.edu.

Eligibility Requirements:

- Age 18
- Minimum 2.5* cumulative GPA
- Some programs require a higher GPA.
- Full-time, degree-seeking student
- Sophomore class standing or higher at the time of participation
- Meet requirements specified by the host institution
- Meet language proficiency requirement, if applicable

Application Checklist:

☐ Completed and signed application
☐ Two academic reference forms with letters on official letterhead
☐ Written statement (250-500 words) about your education abroad expectations
☐ Language proficiency form completed by a qualified language instructor (for institutions at which you will take courses in a language other than English)
☐ Copy of passport photo page
☐ Conduct form completed by the Office of Student Conduct and Community Standards
**Education Abroad**

**Exchange Program Application**

**LEGAL NAME:**
- **Surname:**
- **Given Name:**
- **Middle:**

**Student ID Number:**

**Gender:**

**Date of Birth:**

**PERMANENT ADDRESS:**
- **Number and street:**
- **City:**
- **State:**
- **Zip**

**LOCAL ADDRESS:**
- **Number and street:**
- **City:**
- **State:**
- **Zip**

**Mobile Phone:**

**E-mail Address**

**PLACE OF BIRTH:**
- **City:**
- **State:**
- **Country:**

**Country of Citizenship:**

**Visa Type (Non-U.S.):**

**Anticipated Graduation:**

**Do you have a passport?**
- ☐ Yes
- ☐ No

**Country Issued:**

**Expires:**

**Passport No.**

**Class Standing (while abroad):**
- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior
- ☐ Post-baccalaureate
- ☐ Graduate
- ☐ Law

**Are you currently a student at The University of Akron?**
- ☐ Yes
- ☐ No

**If no, specify university:**

**Major:**

**Minor:**

**Cumulative GPA:**

**Are you in the Honors College?**
- ☐ Yes
- ☐ No

**College:**

**Academic Advisor’s Name:**

**Do you expect to apply for an internship through your major to be performed while abroad?**
- ☐ Yes
- ☐ No

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**Exchange Program Information:**

**UA Exchange Partner University:**

**UA Term Abroad:**
Will you require any academic or physical accommodations or modifications at the host institution? ☐ Yes ☐ No

*Please note, such accommodations or modifications cannot be guaranteed at the host institution.*

Please describe your plans for financing your overseas studies: (use a separate sheet if necessary)

Are you presently receiving any type of financial aid? ☐ Yes ☐ No

Have you ever been:
- Charged in a disciplinary action at any university? ☐ Yes ☐ No
- Charged in a criminal offense in any country? ☐ Yes ☐ No
- Removed or deported from any country? ☐ Yes ☐ No

If yes to any of the above, please provide an explanation (use a separate sheet if necessary).

Would you be willing to talk with other UA students about your experiences abroad after your return if you are accepted into this program? ☐ Yes ☐ No

References: Please list the names of your two UA academic references. These reference forms and letters should be attached to your application at the time of submission to the International Center.

Name: __________________________ Email: __________________________ Work Telephone: __________________________

Name: __________________________ Email: __________________________ Work Telephone: __________________________

I hereby authorize the release of information from my academic records to the International Center and to my proposed host institution. I certify that the information contained in this application is true and correct. On becoming a participant in The University of Akron’s Education Abroad Program, I understand that I shall be subject to all rules and requirements of that program. I authorize my name, likeness, and evaluations to be used in promotional materials for Education Abroad at The University of Akron.

Signature: __________________________ Date: __________________________
ACADEMIC PLANNING FORM

Name: 
Host Institution: 
Term Abroad: 
Year of Program Abroad: 

Using course information available from the International Center or on the host institution’s website, identify the courses you wish to take abroad. Course availability cannot be guaranteed; therefore, students should identify an equal number of preferred courses and alternate courses for each term. In addition, you will need to bring back to Akron all course information (e.g. syllabi) and work (e.g. notes, exams, papers, etc.) completed during your study abroad experience. **You must also submit a completed Transient Permission Form before departure** if you are selected to participate in the program.

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ACADEMIC REFERENCE FORM

Student’s Name: Last:  First:  Middle:  Host Country:

A: The student named above is applying for the designated UA education abroad program. Please assess the applicant’s attributes:

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<th>Academic attributes:</th>
<th>Excellent</th>
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B: Please submit a reference letter, on official letterhead, addressing the following: 1. How long and in what capacity have you known the applicant? 2. Please comment on the applicant in terms of the following: (a) academic suitability for study at an institution abroad; (b) personal suitability for living abroad; (c) how participation in the UA program will be of benefit, both academically and personally; (d) weaknesses; (e) linguistic preparation, if applicable; and (f) any other factors that you believe may affect a successful experience on an UA program.

Evaluator’s name, title and telephone number:

Evaluator’s signature:  Date:

RETURN TO THE ABOVE-NAMED STUDENT TO ATTACH TO THE STUDENT’S EDUCATION ABROAD APPLICATION, OR MAIL DIRECTLY TO: EDUCATION ABROAD, INTERNATIONAL CENTER, THE UNIVERSITY OF AKRON, AKRON, OH 44325-4724, OR SCAN AND EMAIL TO edabroad@uakron.edu.
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STATEMENT OF EXPECTATIONS

Use the space below or another piece of paper to write a 250 to 500 word typed statement describing how this exchange program relates to your present academic, personal, and career interests; and how you plan to apply your experience upon returning to the United States.
LANGUAGE PROFICIENCY ASSESSMENT

To be completed by a professional language instructor

1. How was the evaluation determined?
   - [ ] Based on knowledge of applicant’s coursework in language at this institution
   - [ ] Written examination. Date administered:
   - [ ] Oral examination. Date administered:

2. Please indicate your opinion of the applicant’s present language ability in each of the following categories:
   a. Aural Comprehension
      - [ ] Limited to slow, uncomplicated sentences
      - [ ] Understands simple conversation
      - [ ] Understands conversation on simple academic topics
      - [ ] Understands sophisticated discussion of academic topics
   b. Writing Ability
      - [ ] Writes simple sentences on conventional topics, with frequent errors in spelling and structure
      - [ ] Writes simple sentences on conventional topics, with some errors in spelling and structure
      - [ ] Writes on academic topics with few errors in structure and spelling
      - [ ] Writes with idiomatic ease of expression and feeling for the style of the language
   c. Speaking Ability
      - [ ] Able to complete structurally simple, short phrases
      - [ ] Uses basic grammatical structure, speaking with limited vocabulary
      - [ ] Uses structural patterns, but not with consistent accuracy; adequate to participate in conversational topics
      - [ ] Has control over structural patterns; can handle a wide range of conversational situations
   d. Reading Ability
      - [ ] Limited to simple vocabulary and sentence structure
      - [ ] Understands conventional topics and non-technical subjects
      - [ ] Understands materials that contain idioms and specialized terminology
      - [ ] Understands sophisticated materials, including those in proposed field of study

3. Among other students you have taught at this level, how would you rank this student’s ability in the target language?
   - [ ] Top 10%
   - [ ] Top 25%
   - [ ] Top 50%
   - [ ] Lower 50%

4. What is your opinion of the applicant’s ability to pursue university-level coursework in this language alongside native speakers?
   - [ ] Will require additional training before beginning the program
   - [ ] Should be able to manage adequately after a short period of adjustment abroad
   - [ ] Should have no difficulty

5. Please add any additional comments relating to the applicant’s linguistic ability.

6. Please mark as appropriate:
   - [ ] I unconditionally approve the applicant for study abroad in this language
   - [ ] I conditionally approve the applicant for study abroad in this language

In the case of conditional approval, what are the conditions the applicant must satisfy to receive clearance for study abroad?

Instructor’s Signature: ___________________________________________  Date: __________________________
Name: ___________________________  Position/Title: ___________________________
Telephone: ___________________________