

Date \_\_\_\_\_ Banner I.D. number \_\_\_\_\_ Date of birth \_\_\_\_\_ T-shirt size \_\_\_\_\_

Name *(do not use nicknames, abbreviations or initials)*

Ms.  Miss  
 Mrs.  Mr.

\_\_\_\_\_ LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ PREFERRED

Local address (ACU Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ ACU email address \_\_\_\_\_

Permanent address (Home) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Email address \_\_\_\_\_

Place of birth \_\_\_\_\_ Country of citizenship \_\_\_\_\_

Have you traveled outside the United States?  No  Yes If yes, where? \_\_\_\_\_

Credit hours completed before departure for Study Abroad \_\_\_\_\_ Major \_\_\_\_\_ GPA \_\_\_\_\_  
MINIMUM 2.5\*

Number of semesters completed at ACU \_\_\_\_\_ Current classification \_\_\_\_\_

Do you attend Abilene Christian University?  No  Yes

If **no**, which university do you attend? \_\_\_\_\_

Name and phone of an academic contact person \_\_\_\_\_

Why do you wish to participate in ACU Study Abroad? \_\_\_\_\_

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What courses do you wish to take?

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How will Study Abroad contribute to your academic/personal development?

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Do you have any academic or special needs we should know about to facilitate your study abroad?  No  Yes

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\* For a semester program, the GPA requirement is based on the cumulative GPA as of the completion of the Spring semester preceding the program for which you are applying.

For a Maymester or summer program, the GPA requirement is based on the cumulative GPA as of the completion of the Fall semester preceding the program for which you are applying.

Please initial: \_\_\_\_\_ I affirm that I am not on conduct probation, nor subject to being placed on probation.  
 \_\_\_\_\_ I affirm that I am not on academic probation, nor subject to being placed on probation.  
 \_\_\_\_\_ I affirm that I am current on my student account for previous semesters at ACU.  
 \_\_\_\_\_ I give permission for the Study Abroad Office to consult with all ACU offices necessary to complete the application process, including Student Financial Services and Campus Life.

**Please read the following paragraphs before signing this application:**

I understand that my acceptance is based on a variety of factors, including my academic record and interests, my standing with the university, my suitability for inclusion in the program, and reference forms.

I also understand that, after acceptance into the program, my university account will be charged the full cost of the program (tuition, fees and expenses) at the appropriate time and that it is my responsibility to see that arrangements are made to pay the expenses in full, prior to the start of the program.

I hereby authorize the release of information from my student personnel record upon request of the Abilene Christian University Study Abroad Office. I certify the information on this application to be correct and understand that upon becoming a participant in the program I shall be subject to all rules, regulations and requirements for conduct, scholarship and continuance in ACU. I further understand that failure to comply with rules and regulations of the university could result in immediate dismissal from the program.

I understand that if I choose to stay after the appointed dates set by the Study Abroad program, I am responsible for all housing and travel arrangements as well as any additional charges.

**Please indicate the Study Abroad program(s) for which you are applying:**

PROGRAM	SEMESTER	YEAR
<input type="checkbox"/> ACU in Oxford	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer I <input type="checkbox"/> Summer II <input type="checkbox"/> Other _____	
<input type="checkbox"/> ACU in Latin America	<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Other _____	
<input type="checkbox"/> ACU in Torreon, Mexico	Summer only	
<input type="checkbox"/> Other _____	Short courses offered at various sites	

**NOTE: Approval must be obtained from the Study Abroad Office before attending any of these programs.**

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
STUDY ABROAD REPRESENTATIVE

\_\_\_\_\_  
DATE

Please have all recommendation forms sent to the Study Abroad Office, ACU Box 28226 (or [study\\_abroad@acu.edu](mailto:study_abroad@acu.edu)).  
 See Web site for more information: [www.acu.edu/study-abroad](http://www.acu.edu/study-abroad)

**IMPORTANT NOTICE**

Your application cannot be processed until we have received your application packet, which includes:

- a completed **Application** form
- a **\$200 non-refundable application fee** (cash or check payable to ACU)
- a signed **Withdrawal/Ineligibility Policy** form
- completed **Reference** forms
- a signed **Behavior Contract** form
- a completed **Emergency Notification Form**
- a signed **Release and Indemnification Agreement** form