

**ART SUMMER STUDIES IN CHINA+VIETNAM PROGRAM APPLICATION**  
**Georgia Southern University. May 16- June 8, 2008.**

Complete all blanks, sign the application, and return it to Megan Jacobs, Jessica Hines, or Jeff Beekman in the Arts Building. Submit your deposit in the form of a check \$200 payable to Georgia Southern University. Give it to Daad in the Student Activities Office in Deal Hall. In the "subject line" of the check please write CHINA/VIETNAM. Make sure to tell Daad or her secretary, Angie that your check is specifically the Vietnam study abroad program. Attach your payment receipt from the Student Activities Fees office and submit it to either Megan Jacobs (Arts Building, room 2022) or Jeff Beekman.

**A. Personal Information**

**Name** (Last Name) \_\_\_\_\_ (First Name) \_\_\_\_\_ (Middle Name) \_\_\_\_\_

**Current Mailing Address**

(Street / Apartment Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**Permanent Mailing Address**

(Street / Apartment Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**Phone Numbers** (AREACODE+CURRENT #) \_\_\_\_\_ (AREACODE+PERMANENT #) \_\_\_\_\_

**Email** \_\_\_\_\_

Male  Female **Age** \_\_\_\_\_ **Birth Date** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Eagle ID (if applicable)** \_\_\_\_\_

**Emergency Contact** (Last) \_\_\_\_\_ (First) \_\_\_\_\_ **Relationship** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Address** (Street / Apartment Number) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

**Medical Information** | LIST CHRONIC CONDITIONS, ALLERGIES OR OTHER SPECIAL HEALTH CONCERNS AND PRESCRIPTION MEDICATIONS THAT YOU NEED:

**B. Passport Information**

I am applying for a passport

I have a current passport :

(number) \_\_\_\_\_ (place of issue) \_\_\_\_\_ (date of issue) \_\_\_\_\_ (expiration date) \_\_\_\_\_

**Country of Citizenship** \_\_\_\_\_

**C. Academic Information**

**College/university currently attending** \_\_\_\_\_

**Classification:**  Freshman  Sophomore  Junior  Senior  Graduate | **GPA** \_\_\_\_\_

**Major or area of academic interest** \_\_\_\_\_

**Are you enrolled in a program leading to a degree or diploma?** Yes \_\_\_ No \_\_\_

**Do you have a HOPE grant to attend college in Georgia?** Yes \_\_\_ No \_\_\_

**Program course choice(s):** \_\_\_\_\_

STUDENT NAME PRINT

DATE

STUDENT SIGNATURE

SIGNATURE OF PROGRAM