MLC Study Abroad Application



Please complete this application and return it to the International Services Office. Submitting this application indicates your desire to participate in MLC’s Study Abroad program; approval of the application indicates your acceptance into the program and allows you to move forward in planning your Study Abroad experience.

**Personal Information**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MLC ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (must be age 18 or older at the time of application)

Your MLC email address is the primary address; list an alternate if you would like \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My MLC portal information is correct Yes \_\_\_\_\_



**Academic Information**

I am applying for Study Abroad at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (name of university)

in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ semester of the

 (city, country) (fall / spring / summer)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ academic year.

Name of program provider (ISA, CIS, IFSA- Butler, FU-Best)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current gpa \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current level/year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated month / year of graduation from MLC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important:** You will be required to take the Intercultural Development Inventory (IDI) after approval of your program provider application. The IDI will be paid for by MLC and administrated by the Study Abroad Coordinator. You will be provided with your results and a personalized Intercultural Development Plan (IDP) through a debriefing session with the Study Abroad Coordinator.

For International Services Office

Date received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of IDI debrief: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ Approved \_\_\_ Not Approved

**Financial Information**

Please note the following important information:

1. The financial planning for your experience is your responsibility; however, help is available. You should consult the program provider website for current cost estimates for the program in which you wish to enroll and with the Financial Aid Director in the Financial Services Office for financial aid details.
2. If you are eligible for federal and/or state financial aid as an MLC student, you should be eligible for financial aid for Study Abroad. You will not be eligible for MLC institutional financial aid during the semester you are off campus.

Current **Estimated** cost for my Study Abroad program:

MLC application fee\* $50.00 Passport \_\_\_\_\_\_\_\_

Host school tuition and fees \_\_\_\_\_\_\_\_ Visa \_\_\_\_\_\_\_\_

***or*** Program fee \_\_\_\_\_\_\_\_ Air Fare (RT) \_\_\_\_\_\_\_\_

Room & Board \_\_\_\_\_\_\_\_ Other travel \_\_\_\_\_\_\_\_

Books \_\_\_\_\_\_\_\_ Personal Spending \_\_\_\_\_\_\_\_

Insurance \_\_\_\_\_\_\_\_ (phone, internet, souvenirs, etc.)

 TOTAL \_\_\_\_\_\_\_\_

\*Students applying to study abroad for a full semester will be charged a $50 non-refundable administrative fee to cover costs associated with transaction processing and international financial transfers.



Required signatures **before** submitting this application:

The above student is current in his/her financial obligations to MLC.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 (Student Accounts) (date)

The above student and I have discussed the advisability and the impact of a Study Abroad semester, including the potential impact on an on-time graduation.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

 (Academic Advisor) (date)

I have met with the student and reviewed the financial aid implications of this Study Abroad program.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

 (Financial Aid Director) (date)

Student signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_