

STUDY ABROAD PETITION INSTRUCTIONS

ELIGIBILITY

These instructions pertain to students from any Washington University (WU) College or School applying to an alternative semester study abroad program that is not Washington University approved. General qualifications include a sound academic purpose relevant to the program of choice, appropriate academic preparation, minimum B (3.0) average for college level academic work, and no behavioral concerns. In addition, many programs have their own special requirements.

DEADLINES*

December 1	SIT Fall and Summer Programs
February 1	Fall, Academic Year, and Summer Programs
April 1	SIT Spring Programs
May 1	Spring Programs

*Early application is strongly recommended for all programs. **Late petitions will not be accepted.**

APPLICATION CHECKLIST

WU FORMS

- Program Information
- Data Sheet
- Statement of Purpose
- Study Plan
- Academic Record

MEETING WITH ASSOCIATE DIRECTOR, OVERSEAS PROGRAMS AT LEAST TWO WEEKS BEFORE DEADLINE. YOU MUST BRING A DRAFT OF YOUR STATEMENT OF PURPOSE WITH YOU. CALL 5-5958 FOR AN APPOINTMENT.

LETTER OF ENDORSEMENT

Please arrange for one or more letters to be written on your behalf specifically encouraging the Study Abroad Advisory Board (SAAB) to approve your petition. One letter must be written by your Departmental Study Abroad Advisor (SAA) discussing the academic suitability of the alternative program and why your academic purpose precludes participation in a WU approved program. If your Departmental SAA has not been your instructor, you may request a second letter of reference from a faculty member who knows your academic work.

PROGRAM-SPECIFIC FORMS AND SUPPLEMENTAL MATERIALS

Please submit information about the program, including course descriptions.

Please make sure that every page of the application has your name, program, and term for which you are petitioning to study abroad.

Submit all application materials to:

Office of Overseas Programs
Campus Box 1088
Washington University
1 Brookings Drive
St. Louis, MO 63130
Tel: 314-935-5958 Fax: 314-935-7642
Email: overseas@wustl.edu
Website: <http://www.artsci.wustl.edu/~overseas/>

PROGRAM INFORMATION

Student: Last Name: _____ First Name: _____ Middle Initial: _____
 Period of intended study abroad: Year(s): _____ ___ Fall ___ Spring ___ Academic Year ___ Summer

 Country Foreign Institution or Program Name Primary Subject to be Studied Abroad
 E-mail (must be an "edu" address): _____

Major: _____ Second Major or Minor (if any): _____
 Major Advisor: _____
 Name Telephone E-mail Address
 Advisor for Second Major
 or Minor (if applicable): _____
 Name Telephone E-mail Address
 U.S. Program Sponsor (if applicable): _____
 Foreign Institution (if applicable): _____
 Program's Web Page (if any): _____
 Program Duration: _____ to _____
 Starting Date Completion Date
 Application Submission: _____
 Acceptance Start Date (month/day/year) Final Deadline (month/day/year)
 Admission Process (check one): ___ Rolling ___ Best among applicants who meet the deadline

Conditions of Participation if Petition is Approved:

- I understand that this petition will be evaluated with regard to the following points:
 - The academic merits of the proposed program, including curriculum, faculty, etc.
 - My academic preparation for this experience including prior/current course work relevant to the subject area, geographic region, and foreign language proficiency
 - Why my academic needs cannot be met by a regular WU program
- I understand that geographic and institutional preferences will be insufficient to justify approval of my petition.
- I understand that if my petition is approved, I will pay WU tuition for this program, which will not cover housing, meals, airfare, insurance, etc. If this is a petition for a summer program, I will pay direct costs to the program.
- I understand that if my petition is not approved, I have the right to appeal in writing and I must address the reasons provided by the SAAB for not approving the petition.

Student's Signature:
 I understand and accept the conditions of participation described above, and I now present my petition to the Study Abroad Advisory Board.

 Student's Signature WU Student No. Date

Verification of Meeting with Associate Director of Overseas Programs: After you have met with the Associate Director of Overseas Programs and filled out the rest of this form, you may submit this form unsigned to Overseas Programs.

I hereby confirm that I have met with this student and reviewed the program description and plan of study.

 Associate Director's Signature Date

DATA SHEET

Please print in ink.

Period of intended study abroad: Year(s): _____		
___ Fall	___ Spring	___ Academic Year ___ Summer
Program Choice: Country	Foreign Institution or Program Name	Primary Subject to be Studied Abroad
_____	_____	_____

Personal Data:

Last Name: _____ First Name: _____ Middle Initial: _____

___ Female ___ Male WU Student No. (SSN for non-WU): _____ Birth date (mm/dd/yr): ___/___/___

US citizen? ___Yes ___No If "yes" Passport Number: _____

If not US citizen, nationality: _____ and residency/visa status: _____

Telephone number: _____ and "edu" e-mail: _____@_____.wustl.edu
 (**cannot** be aol, hotmail, yahoo, etc.)

WU Students Only: After confirming WebSTAC includes your current local address and telephone number, check here ___

Permanent (home) address: _____
 _____ Street

City	State	Zip	Country
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Parents:	Mother	Father
Name:	_____	_____
Complete Address:	___ same as permanent address	___ same as permanent address
(List full address of both if different)	_____	_____
Telephone:	home: _____	home: _____
	work: _____	work: _____
E-mail:	_____	_____

Educational Information: WU College or School: ___ A&S ___ Arch. ___ Art ___ Bus. ___ Eng.

If not a WU student, name of your college or university: _____

Major(s) for which you intend to receive credit for course work abroad: _____

Minors(s) for which you intend to receive credit: _____

Class standing (at time of study abroad): ___ Fr ___ So ___ Jr ___ Sr ___ Just Graduated ___ Gr

Overall GPA: _____

On-campus activities: Please list the organizations, teams, or clubs in which you are actively involved:

References: Name	Department	E-mail Address
1. _____	_____	_____
2. _____	_____	_____

STATEMENT OF PURPOSE

Please answer on a separate sheet of paper. Your typed response should be 3 pages maximum, double-spaced with 1 inch margins using 12pt. font. Make sure to include your name, ID and the program for which you are applying.

Present a compelling case for your participation in the selected program. Geographic and institutional preferences will be insufficient to justify approval of your petition. You should emphasize:

- Your academic purpose in choosing the program including a summary of the merits of the program.
- Why your academic needs cannot be met by a regular WU program.
- How your proposed course of study abroad complements your WU academic endeavors and your plans for completing your degree (list courses, distribution you will still need, language, etc.)
- Your academic preparation for this experience including prior/current course work relevant to the subject area, fieldwork (if any), geographic region, and foreign language proficiency.
- A description of the faculty who will be teaching on your proposed program and/or the academic strengths of the institution you have identified.

NOTE: YOU MUST MEET WITH THE ASSOCIATE DIRECTOR OF OVERSEAS PROGRAMS PRIOR TO SUBMITTING YOUR PETITION, AND BRING A DRAFT STATEMENT OF PURPOSE TO YOUR APPOINTMENT. PLEASE CALL 5-5958 TO SCHEDULE A MEETING.

STUDY PLAN

This form should be filled out in consultation with the Study Abroad Advisor(s) (SAA) in the department(s) in which you wish to receive study abroad credit. For a list of SAAs, please refer to <http://www.artsci.wustl.edu/~overseas/advisors/saadirectory.html>

Student: Last Name: _____ First Name: _____ Middle Initial: _____
 Period of intended study abroad: Year(s): _____ ___ Fall ___ Spring ___ Academic Year ___ Summer

_____ Country _____ Foreign Institution or Program Name _____ Primary Subject to be Studied Abroad

I acknowledge that the advisor's signature does not guarantee the amount of credit to be awarded for study abroad or the ultimate acceptability of proposed courses or subjects for satisfying specific degree requirements, both of which depend upon a review of academic performance and course work after completion of the program.

Student's Signature: _____

Departmental/College/School SAA:

Please review the following with the student before completing the chart below:

- Available course titles and descriptions to identify appropriate courses or subjects for satisfying major/minor, distribution and elective requirements within the student's degree plan
- Portfolio requirements where applicable and policies for earning academic credit:
 - o up to 3 credits per semester may count for unclustered NS/LA/TH/SS distribution
 - o a C- or better is required depending on the department
 - o it is NOT possible to receive WI/QA/SD/CD credit for courses taken abroad

To be completed by the SAA

Courses or subjects for which student wishes to receive major or minor credit	WU course number	# of WU credits	SAA initials Preliminary approval for course work
1.			
2.			
3.			
4.			
5.			

Brief description of proposed project or portfolio: (Minimum is copies of course descriptions, reading lists, papers written.)

Courses or subjects proposed for other WU degree requirements	Distribution Credit: NS/SS/LA/TH only 1 course/semester Leave blank if no distribution credit is needed.
1.	1.
2.	2. (AY students only)
3.	N/A

Amount of credit likely to count towards major or minor:

_____ units _____ major/minor subject	_____ units _____ major/minor subject
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Approved by:

_____ Relevant Dept. SAA Signature	_____ Printed Last Name	_____ Department	_____ Date
_____ Secondary SAA Signature	_____ Printed Last Name	_____ Department	_____ Date

ACADEMIC RECORD FORM

This form will be used to obtain your official WU transcript which will be evaluated as part of the application process and sent to your program of choice if your petition is approved. You do NOT need to order a separate transcript.

Student: Last Name: _____ First Name: _____ Middle Initial: _____

Period of intended study abroad: Year(s): _____ ___Fall ___Spring ___Academic Year ___Summer

_____ Country

_____ Foreign Institution or Program Name

_____ Primary Subject to be Studied Abroad

Please sign below to authorize the Office of Overseas Programs to request, receive, and distribute official WU transcripts of your academic record on your behalf in support of your application for study abroad.

_____ Student's Signature

_____ WU Student No.

_____ Date

*Note: If you transferred to WU from another college or university, an official transcript from that institution may be required as well. Please clarify the requirement with the Office of Overseas Programs.

Disciplinary Record

Have you ever been before a university disciplinary officer, including but not limited to the Judicial Administrator, Residence Life, Greek Life, Athletics, or a Dean's Office? ___Yes ___No

If yes, please attach a separate sheet of paper with a brief description of the circumstances.

LETTER OF ENDORSEMENT

Student: Last Name: _____ First Name: _____ Middle Initial: _____

E-mail address (must be an "edu" address): _____ Telephone: _____

Period of intended study abroad: ___ Fall ___ Spring ___ Academic Year ___ Summer Year(s): _____

Program student is applying to:

Country	Foreign Institution or Program Name	Primary subject to be Studied Abroad
_____	_____	_____

Name of Reference: _____

(NOTE: YOU MUST HAVE A LETTER OF ENDORSEMENT FROM YOUR DEPARTMENTAL STUDY ABROAD ADVISOR. YOU MAY REQUEST A SUPPLEMENTAL LETTER FROM ANOTHER FACULTY MEMBER IF DESIRED.)

Date this form was given to Reference: _____

Due date: ___ Dec 1 ___ Feb 1 ___ Apr 1 ___ May 1 ___ Other _____

Statement: I hereby ___waive ___do not waive my ability to view this letter.

Student's Signature

* Please meet with your departmental SAA to review your essay, transcript or Internal Record printout from WebSTAC and the program description. Also, be sure to discuss your study abroad goals and expectations beforehand. You should allow at least two weeks for the letter to be submitted. You may request other letters of endorsement to strengthen your petition, but only the primary letter is required.

To the Departmental Study Abroad Advisor:

- Please address the following topics:
 1. Academic suitability of the proposed alternative program for this particular student.
 2. Confirmation that the student's academic needs cannot be adequately met by participation in a listed WU-sponsored or pre-approved program.
 3. The student's academic preparation for participation in the proposed alternative program including relevant prior or current course work and familiarity with the local language and culture
 4. Personal suitability for participation in the proposed alternative program, reflecting on the applicant's maturity, self-discipline, adaptability, and initiative.
- Please write your endorsement letter "To Whom It May Concern" on letterhead stationery.
- Please send this form and the signed and dated letter directly to:

Overseas Programs
Campus Box 1088
Washington University
1 Brookings Drive
St. Louis, MO 63130
Tel. 314-935-5958
Fax 314-935-7642
E-mail: overseas@wustl.edu