

**CLARK ATLANTA UNIVERSITY
STUDY ABROAD
STUDENT APPLICATION FORM**

(Please print the form, complete it, and return it to the Study Abroad Office, Sage-Bacote Hall, Room 323)

Name: _____

Email Address: _____

Social Security Number: _____ - _____ - _____ **Age:** _____

Birth Date: ____ / ____ / ____ **Marital Status:** ____ Married ____ Single ____ Divorced
(Please check one)

Classification: Freshman ____ Sophomore ____ Junior ____ Senior ____
(Please check one)

College Address and Telephone Number:

Home Address and Telephone Number:

Overall GPA: _____ **Major:** _____

Major Advisor: _____

Department Chair: _____

Minor (if applicable): _____

Projected Date of Graduation: _____

Foreign Languages for Which you Have Received College Credit:

Are you fluent in any foreign languages? If yes, indicate which one(s):

Country or Countries in Which you Wish to Study:

Have you ever traveled abroad? If yes, where and when?

Are you presently receiving financial aid from Clark Atlanta University? If yes, indicate the type of aid:

Are you presently receiving financial aid from sources outside of Clark Atlanta University? If yes, indicate the type and if there are any stipulations attached to the award:

In order to participate in the Study Abroad Program, you will need to provide two academic references from your professors. When you start applying for programs, this same information may be applicable.