



University of Missouri-St. Louis
Center for International Studies
Study Abroad Office

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St. Louis, MO 63121
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www.umsl.edu/studyabroad

Semester in Greece Application

Please completely fill out this form and return it to the Study Abroad Office before the deadline.

Applicant Information

Name: _____
Last First MI

Home University: _____

UMSL Student #(if applicable): _____

Date of Birth: _____

Gender: Male Female

Citizenship: _____

Passport # (if known): _____

Please complete the following and check the quickest, most reliable way of contacting you.

Preferred Email: _____ Cell Phone: _____

Local Address: _____

Local Phone: _____ Local address valid until (date): _____

Permanent Address: _____

Permanent Phone: _____

Emergency Contact: _____

Address: _____

Home Phone: _____ Work Phone: _____ Email: _____

Which is your billing address? Local Permanent

Academic Information

Classification during your intended period abroad:

FR SO JR SR GR OTHER _____

Major(s): _____ Minor(s): _____

GPA: _____ Expected Date of Graduation: _____

Additional Information

Any medical conditions that require special care and/or prescription medications?

May the Center for International Studies provide information related to your study abroad program to your emergency contact?

Yes No

May the Center for International Studies release your name and email address to present or potential Semester in Greece participants?

Yes No

Name of preferred roommate: _____

I certify that the information in this application is true and complete to the best of my knowledge. I understand that the application process will include supplementary materials and required payments, which I agree to complete and submit promptly. If accepted, I will participate in all required orientations and complete all evaluations. Finally, I authorize the Study Abroad Program Coordinator to release any information deemed relevant to my health and/or safety.

Signature

Date

Additional Materials: Submit ALL materials and deposit to the Study Abroad Office.

- Official university transcript
- Letter of recommendation
- Two passport-size photos
- \$500 non-refundable deposit, check payable to UMSL (deposit refunded if not accepted into the program)
- Each participant will take 12-15 credits. The program fee is based on 12 credit hours. If you take more, you will be billed for these additional credits at the current fees rate. Please indicate your top 5 course choices. Your list does not constitute course registration, which is dependent on sufficient enrollment. If one of your course selections is the Independent Study, please specify a topic.

- 1.
- 2.
- 3.
- 4.
- 5.