

**Destination** \_\_\_\_\_

(Global Studies Course GLST2980/Internship/Cooperative)

**Contact Information (Please Print)**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ SCC ID# \_\_\_\_\_ Cell Number (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Current Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Permanent Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_  
(if different than current address)

**Name of Emergency Contact Person** (Print) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Home Phone Number (\_\_\_\_\_) \_\_\_\_\_ Work Phone Number (\_\_\_\_\_) \_\_\_\_\_ Cell Phone Number (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**Signature of the Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

(If the participant is still a dependent, this application must be signed by parent/legal guardian.)

**Signature of the Parent/Legal Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Academic Information**

Campus \_\_\_\_\_ Program of Study \_\_\_\_\_

Number of terms at SCC \_\_\_\_\_ Name of SCC faculty reference \_\_\_\_\_

Current GPA \_\_\_\_\_ Cumulative GPA \_\_\_\_\_

**Foreign Language**  Yes  No Language(s) \_\_\_\_\_

Have you ever traveled overseas?  Yes  No If yes, what countries have you visited? \_\_\_\_\_

Do you have a valid passport?  Yes  No Passport Number\* \_\_\_\_\_ Passport Expiration Date\* \_\_\_\_\_

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

**\*Your passport must be valid for six (6) months AFTER the Global Studies GLST2980 Course/Internship/Cooperative END date!!**

**If you need to apply for a passport or renew a passport, you need to submit/renew your passport application immediately. DO NOT DELAY!!**

**Personal Statement**

Type a 750 word count essay explaining your desire to participate in the Global Education Travel Course/Internship/Cooperative.

Please attach your personal statement to this form and return it to your instructor.